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**Wong et al.**

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(54) **CIRCULAR FIXATOR SYSTEM AND METHOD**

(71) Applicant: **WRIGHT MEDICAL TECHNOLOGY, INC.**, Memphis, TN (US)

(72) Inventors: **Kian-Ming Wong**, Lakeland, TN (US); **Jason Edie**, Sandy, UT (US)

(73) Assignee: **WRIGHT MEDICAL TECHNOLOGY, INC.**, Memphis, TN (US)

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(63) Continuation of application No. 17/845,182, filed on Jun. 21, 2022, which is a continuation of application No. 16/850,387, filed on Apr. 16, 2020, now Pat. No. 11,389,199, which is a continuation of application No. 15/782,204, filed on Oct. 12, 2017, now Pat. No. 10,660,671, which is a continuation of application (Continued)

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**A61B 17/17** (2006.01)  
**A61B 17/62** (2006.01)  
**A61B 17/64** (2006.01)

(52) **U.S. Cl.**  
CPC ..... **A61B 17/62** (2013.01); **A61B 17/171** (2013.01); **A61B 17/6425** (2013.01); **A61B 17/645** (2013.01)

(58) **Field of Classification Search**  
CPC ... A61B 17/17; A61B 17/171; A61B 17/1771; A61B 17/1775; A61B 17/1785; A61B 17/1796  
See application file for complete search history.

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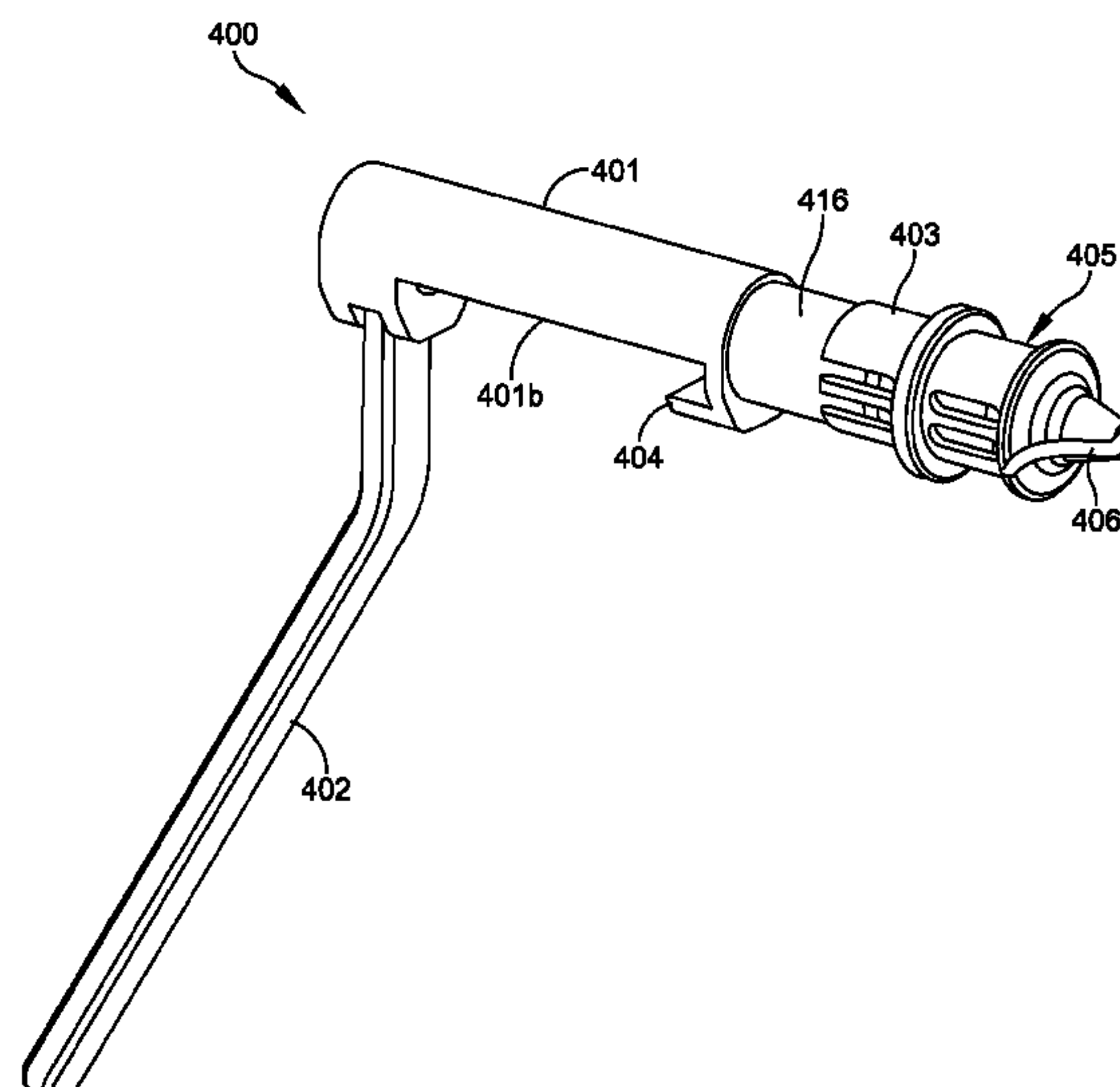
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*Primary Examiner* — Nicholas W Woodall  
(74) *Attorney, Agent, or Firm* — DUANE MORRIS LLP

(57) **ABSTRACT**

A device includes a plurality of rings. Each ring has a first face, a second face, and at least one slot defined by first and second interior edges of the ring on opposing sides of the slot. The at least one slot penetrates from the first face to the second face. The first face of each ring has a first recess adjacent the slot on the first edge and a second recess adjacent the slot on the second edge. A plurality of posts join each one of the plurality of rings to an adjacent one of the plurality of rings.

**19 Claims, 31 Drawing Sheets**



**Related U.S. Application Data**

No. 14/419,604, filed as application No. PCT/US2014/036572 on May 2, 2014, now Pat. No. 9,808,288.

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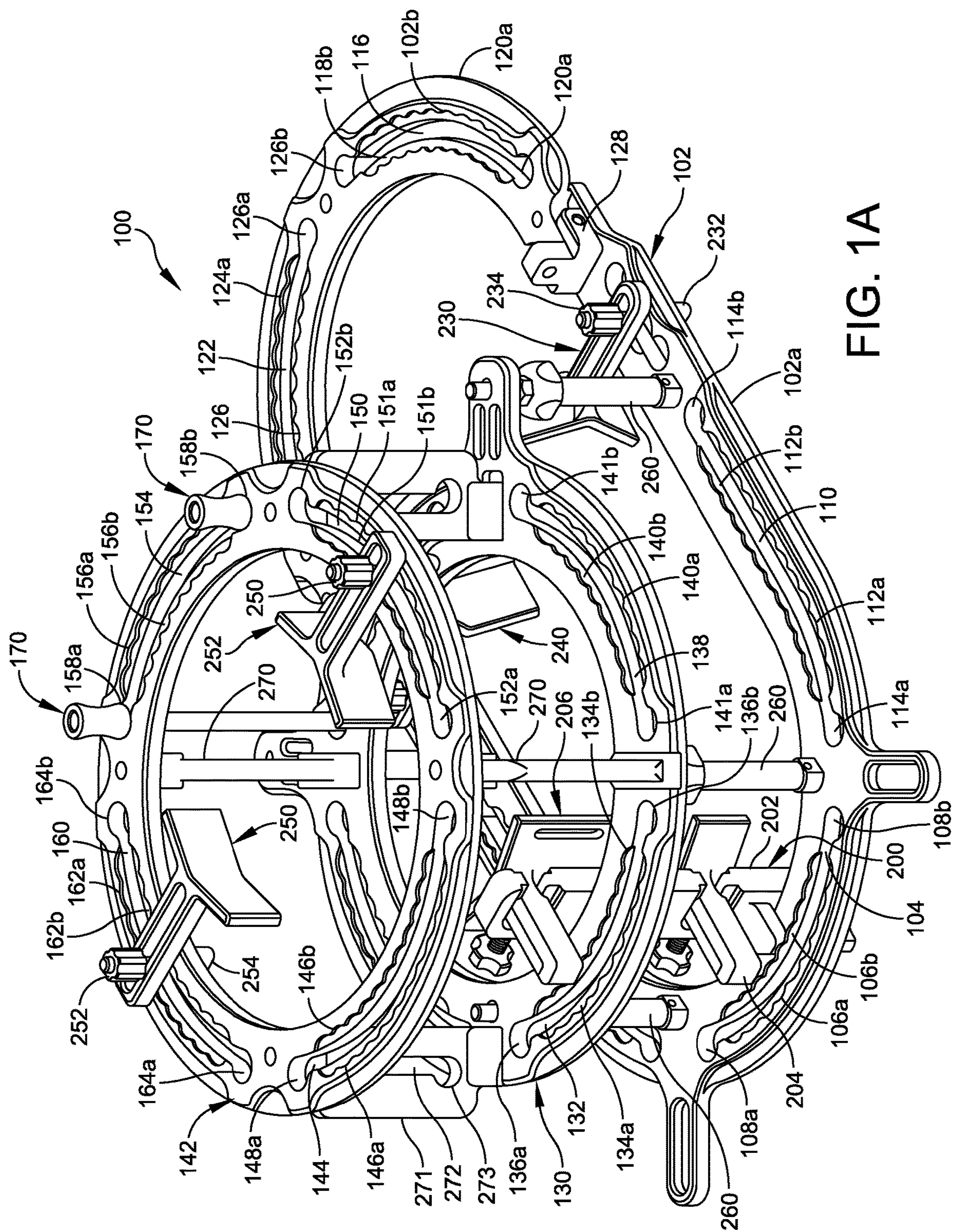


FIG. 1A



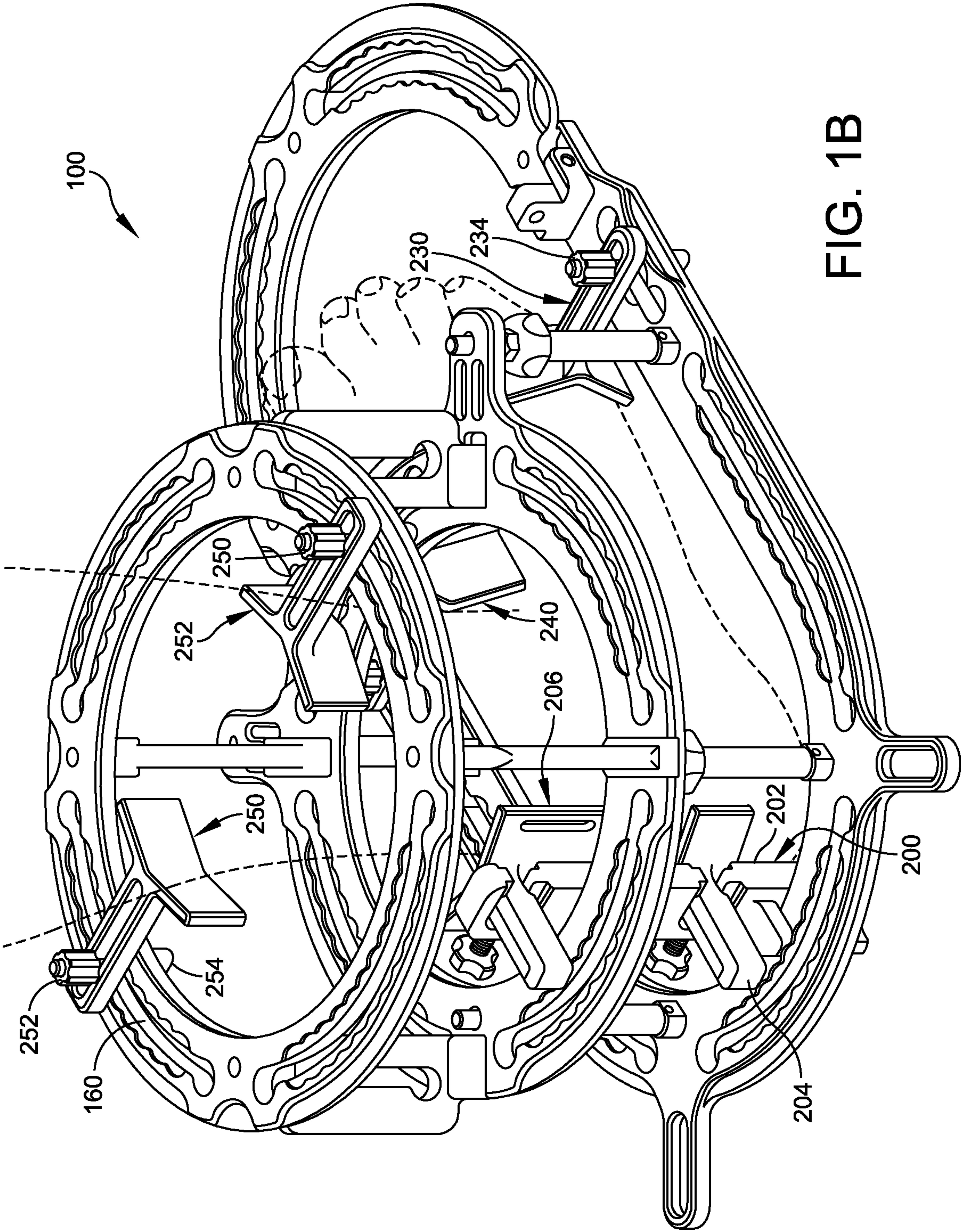


FIG. 1B

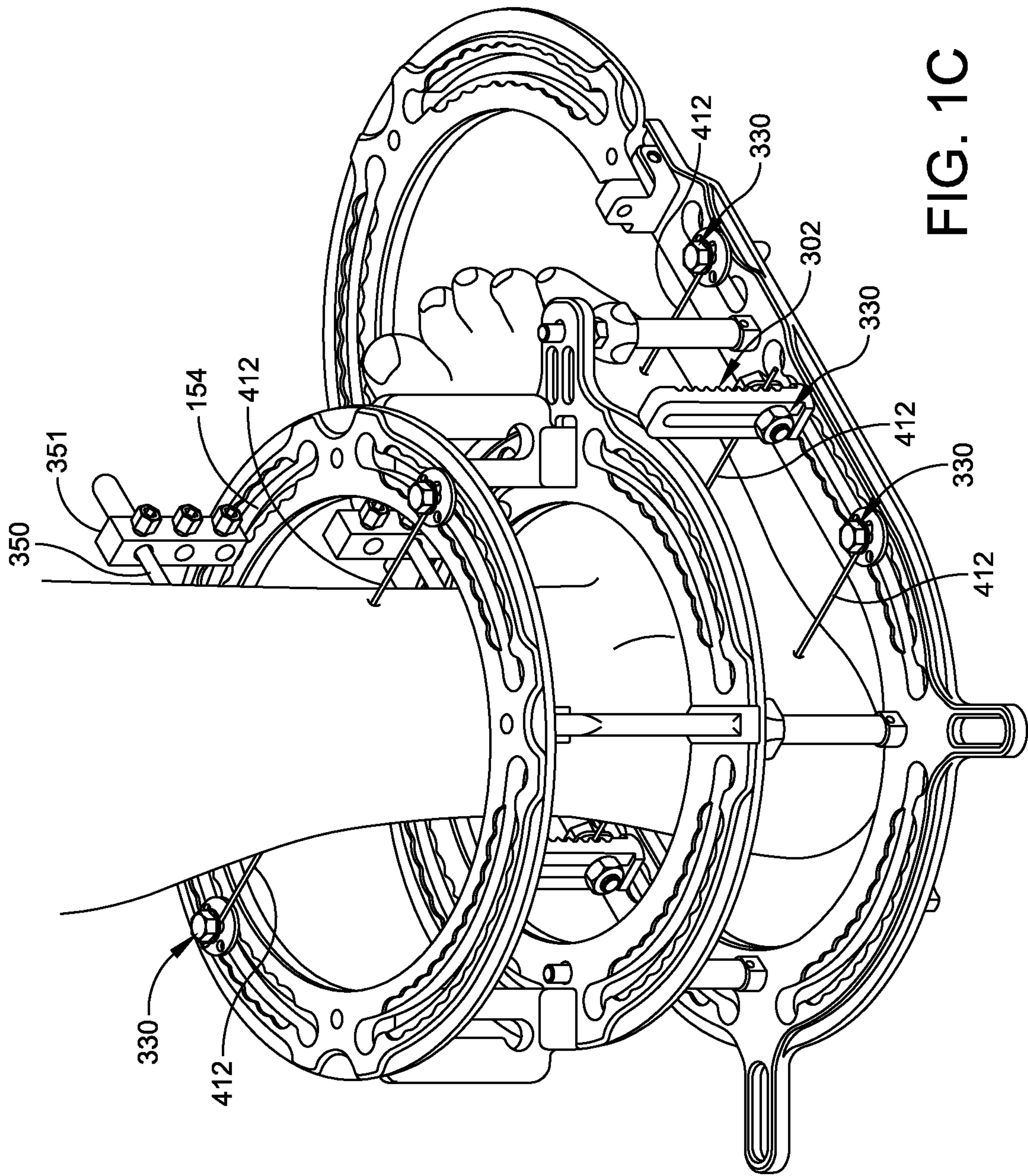
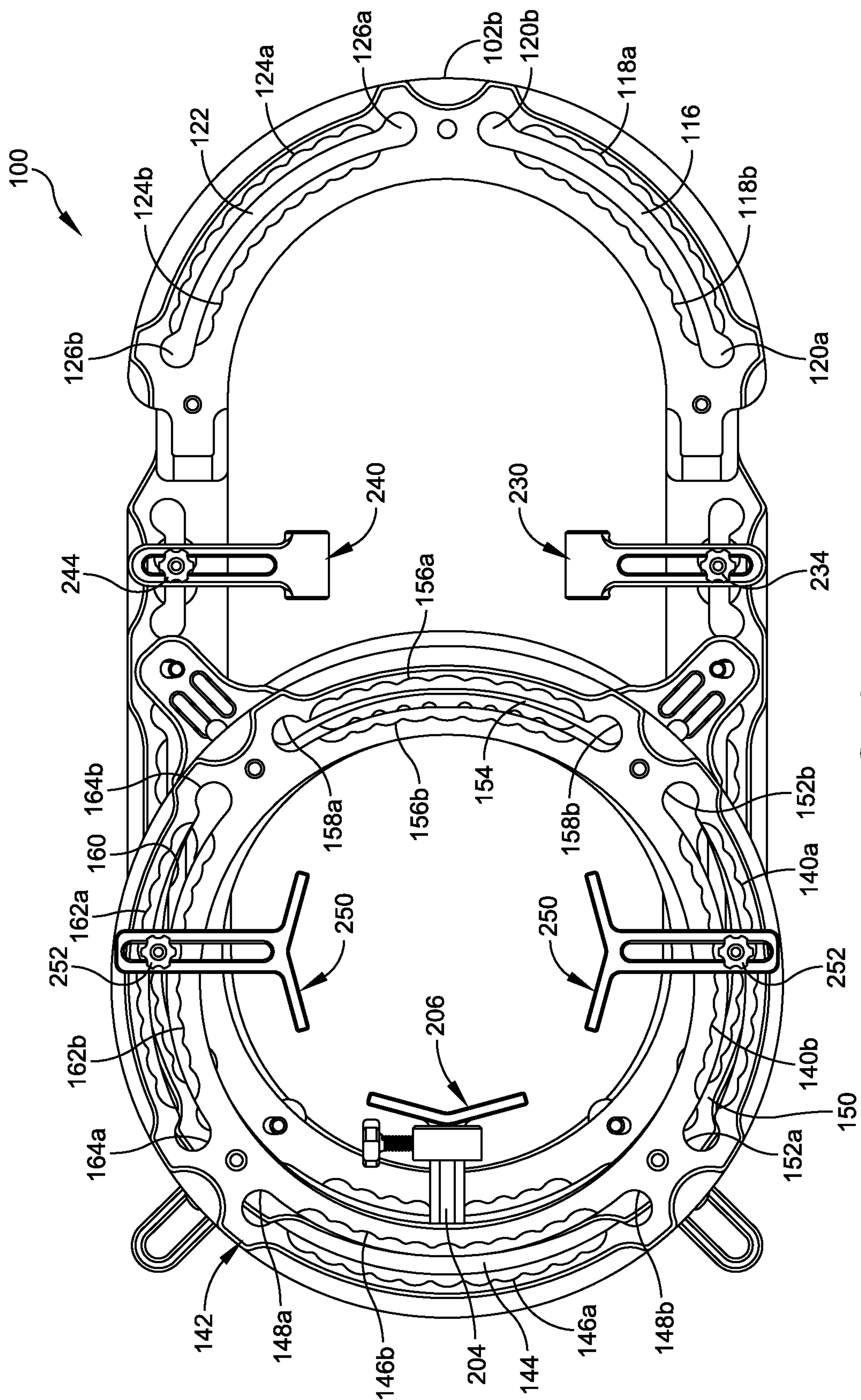
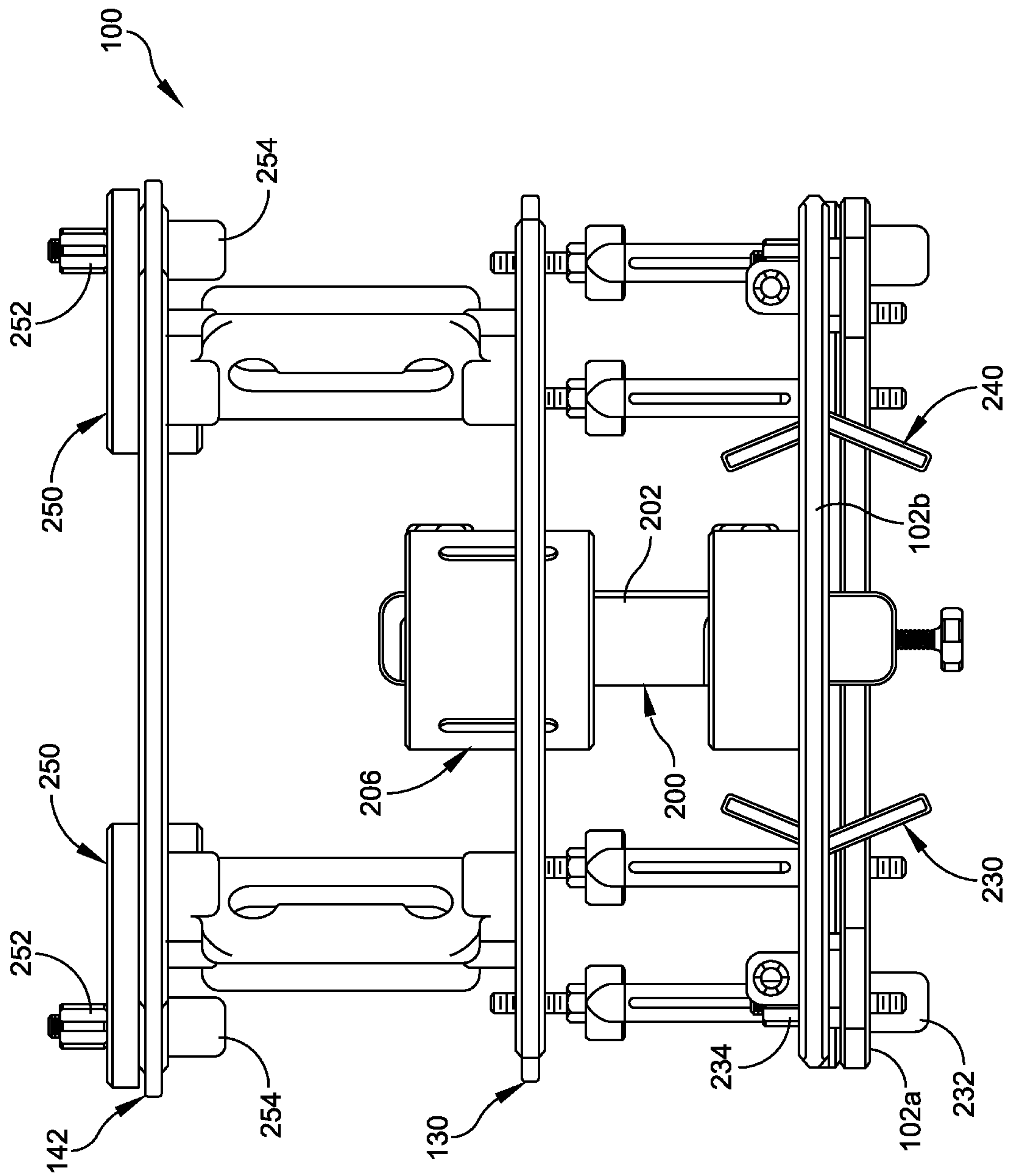


FIG. 1C





**FIG. 2A**



**FIG. 2B**

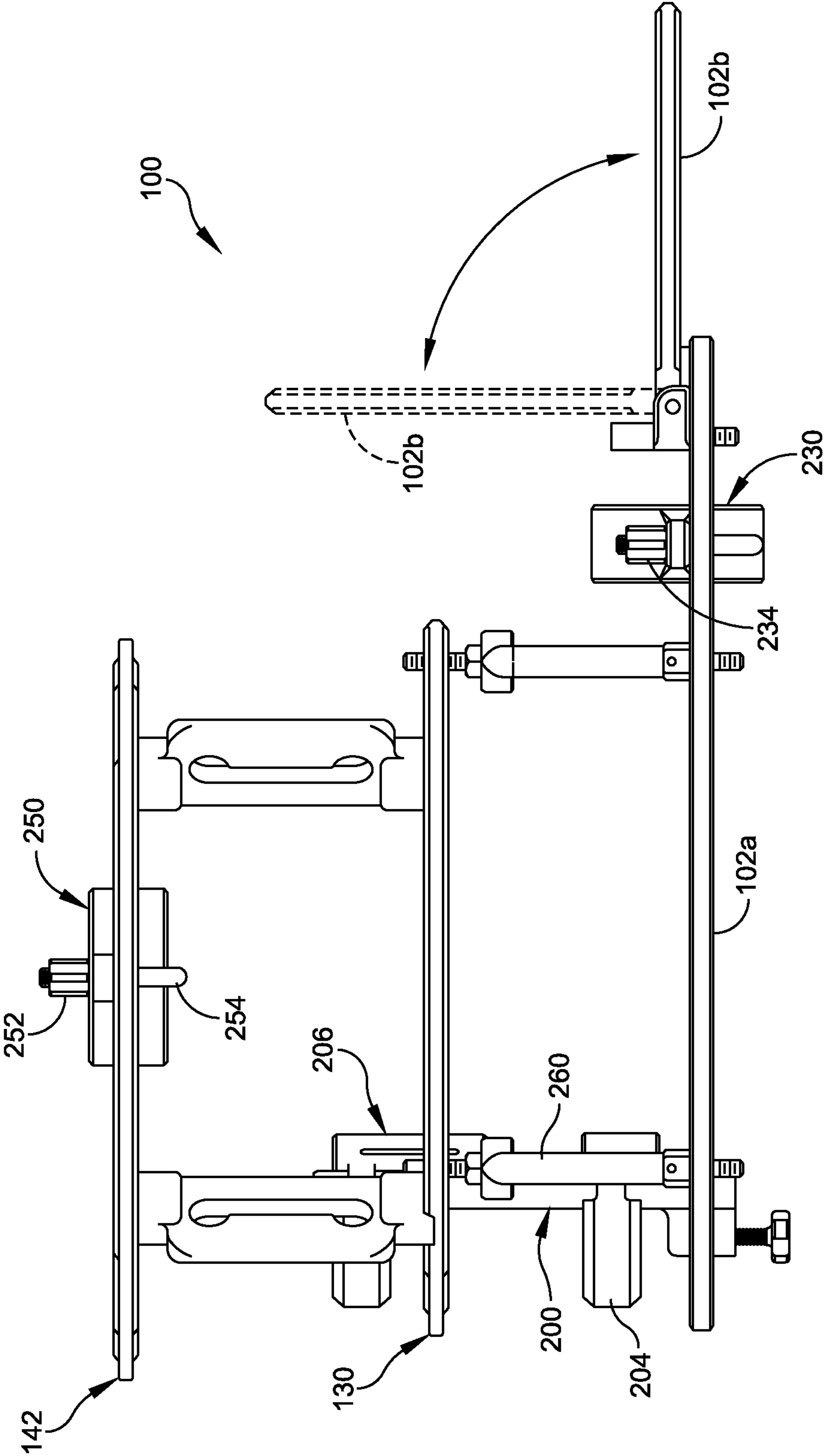


FIG. 3



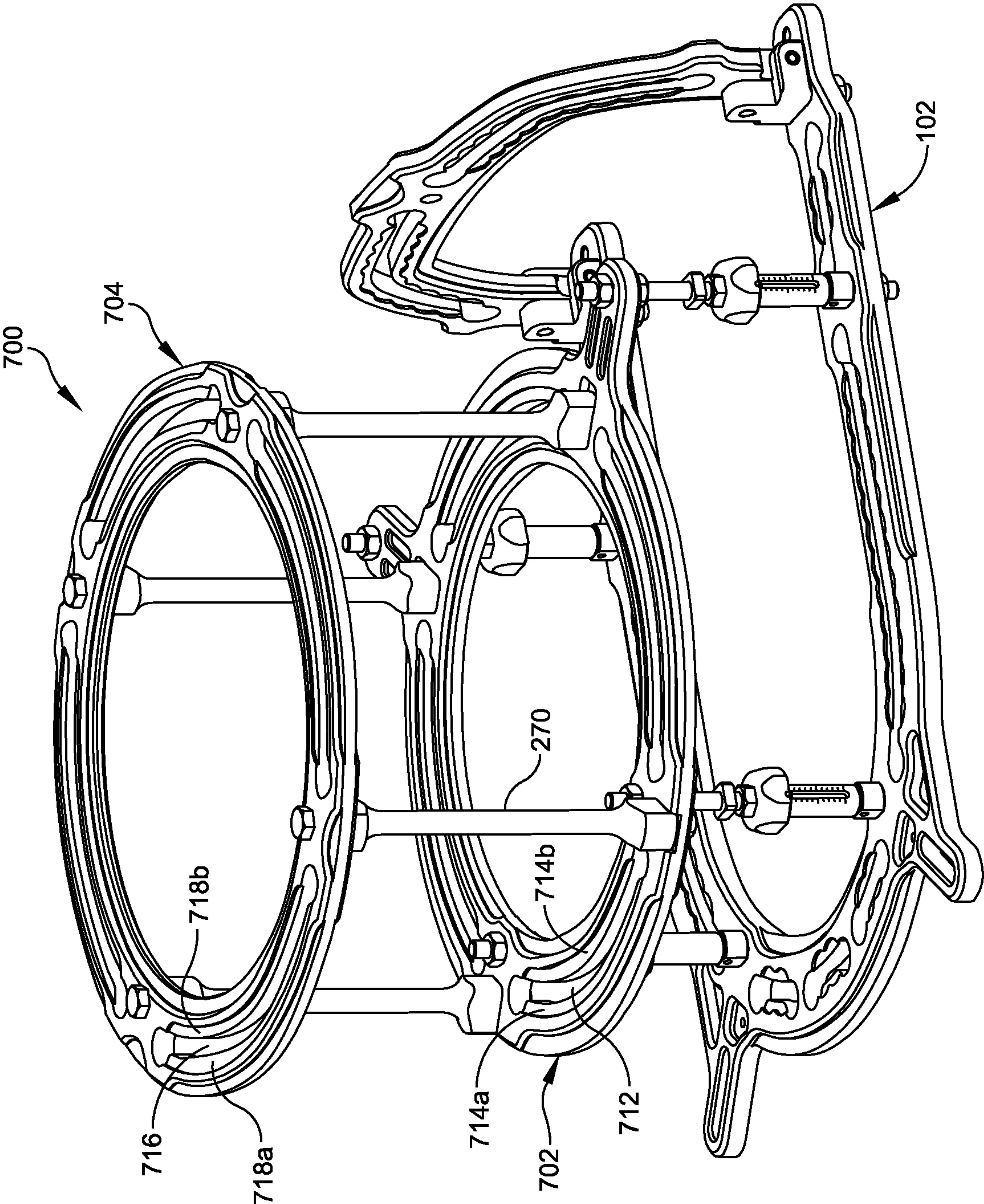


FIG. 4A

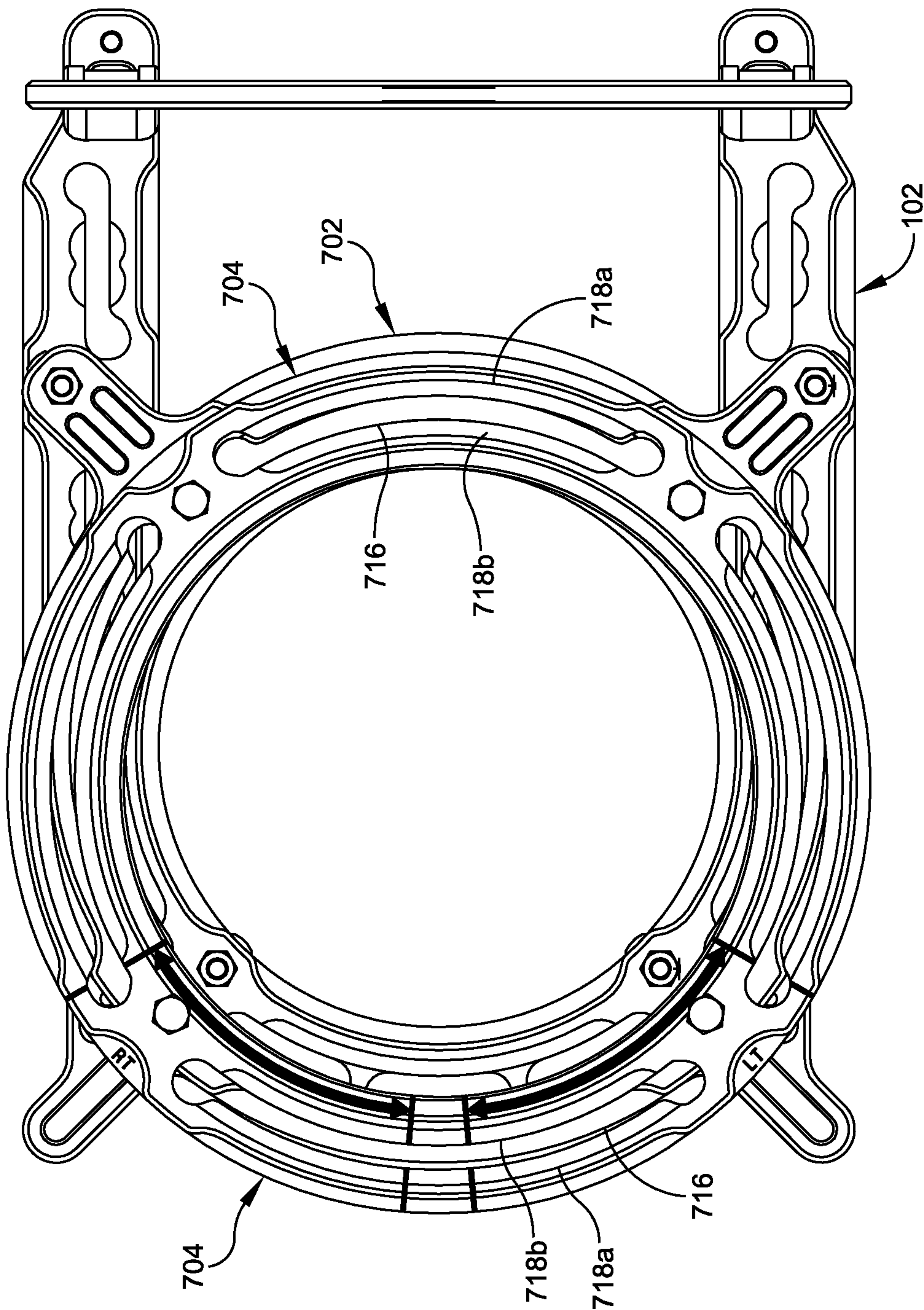


FIG. 4B



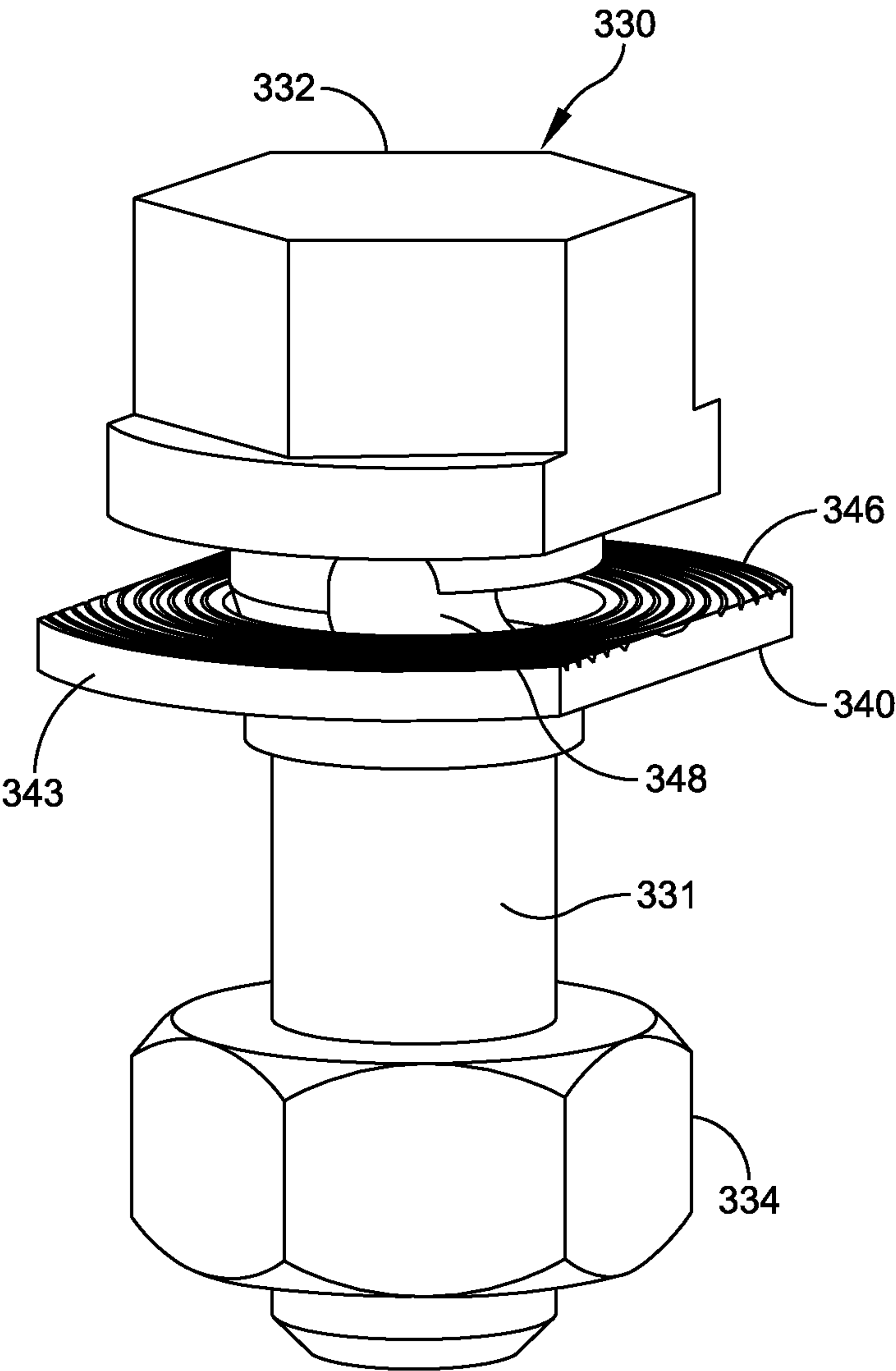


FIG. 5

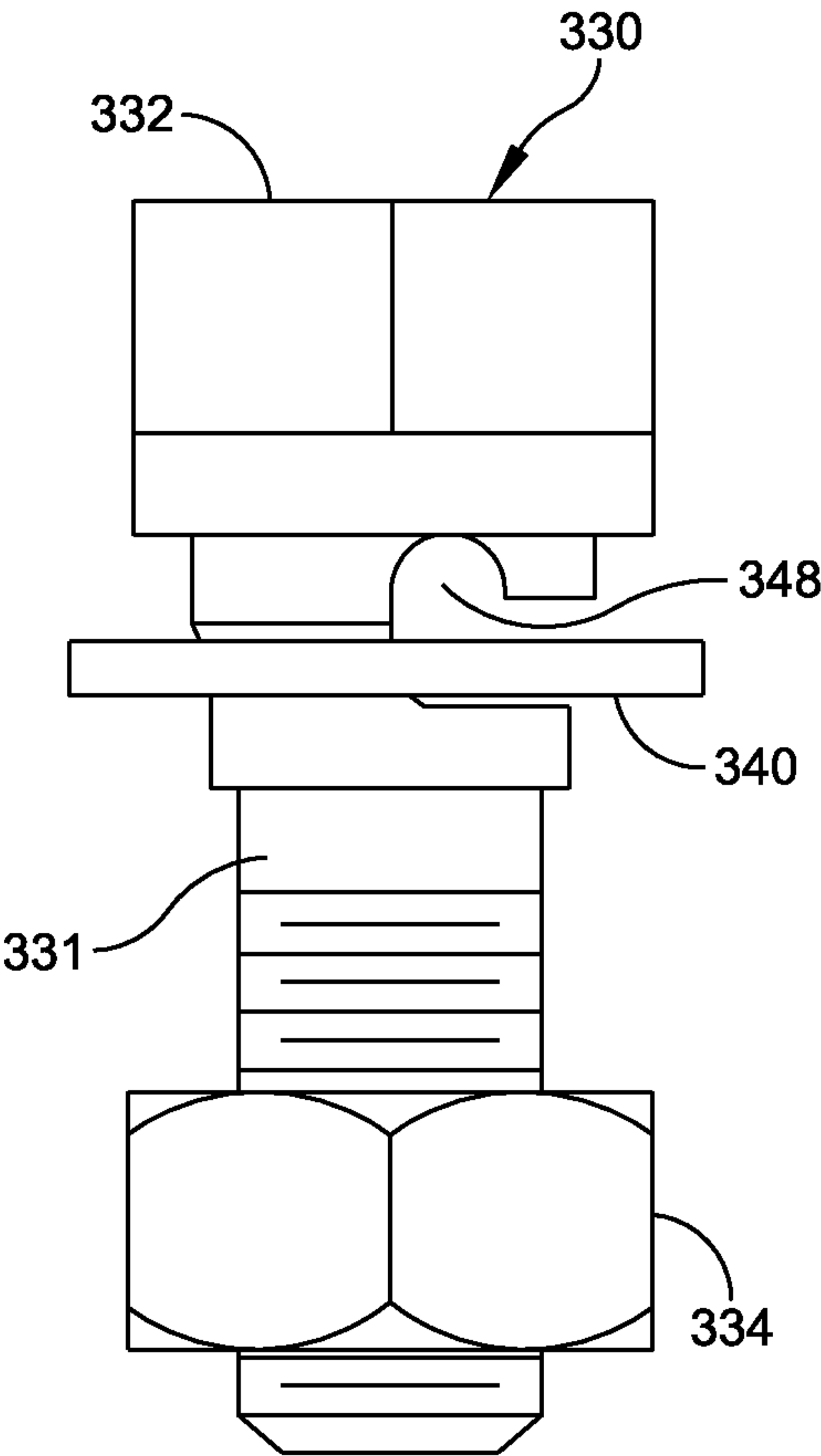


FIG. 6



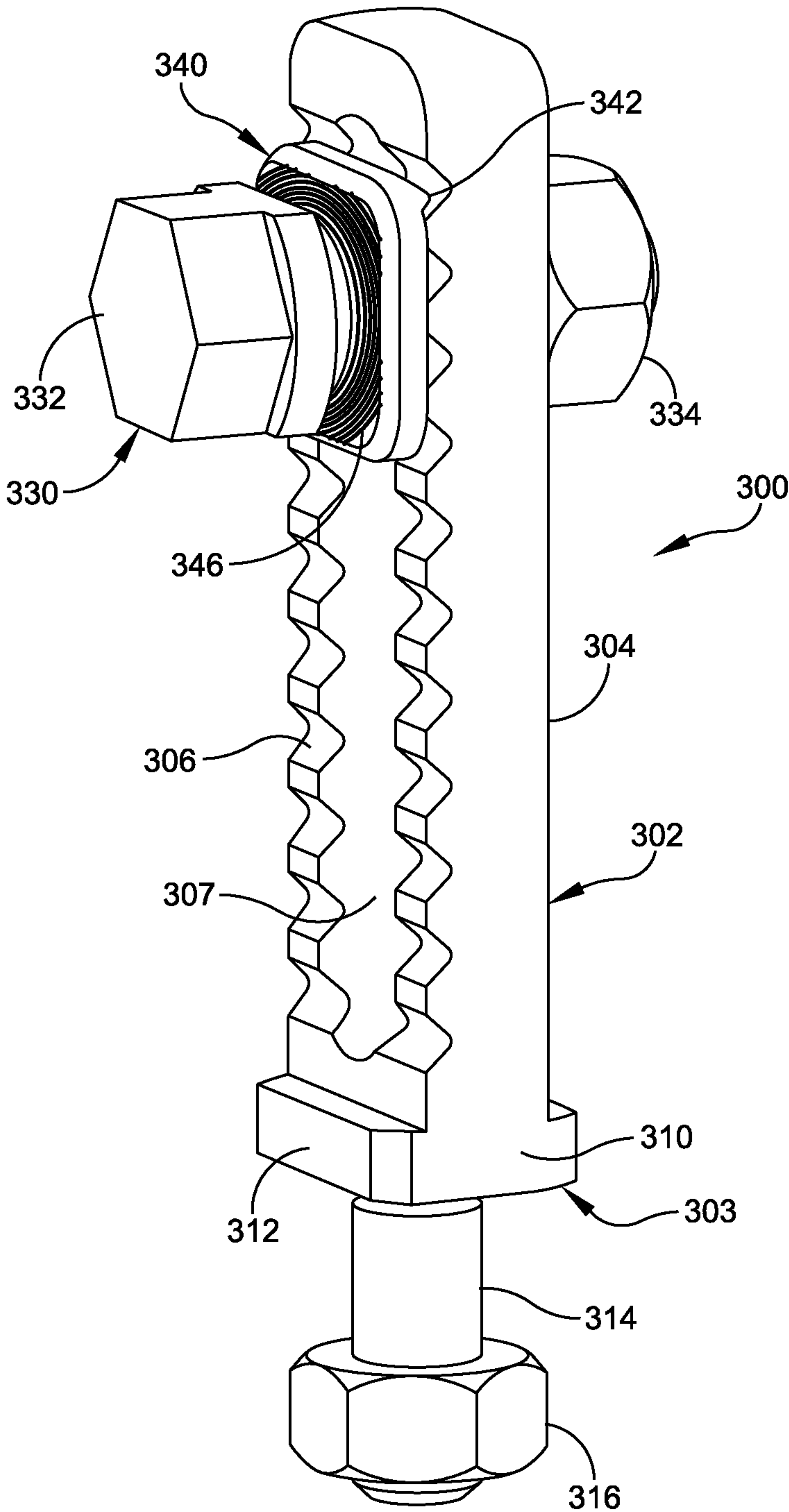


FIG. 7

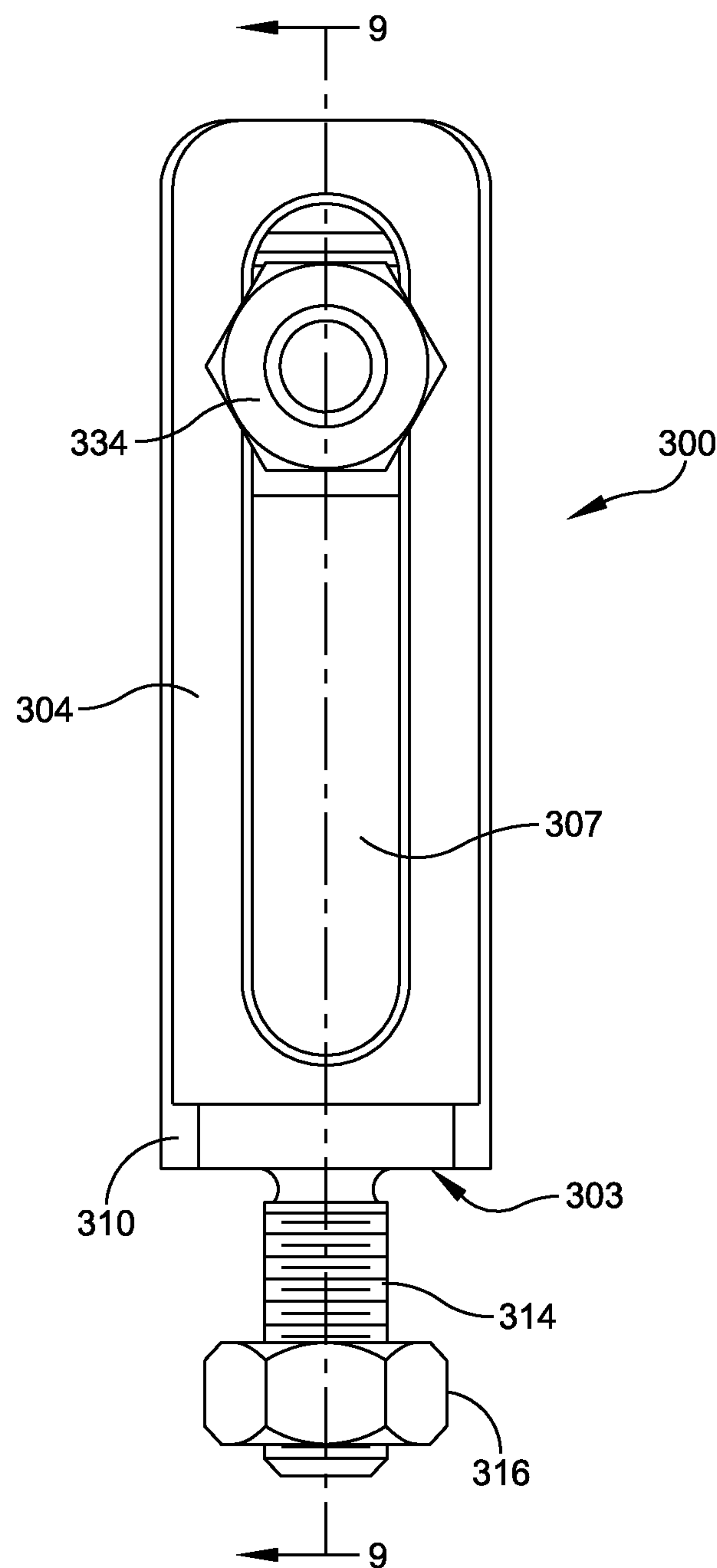


FIG. 8



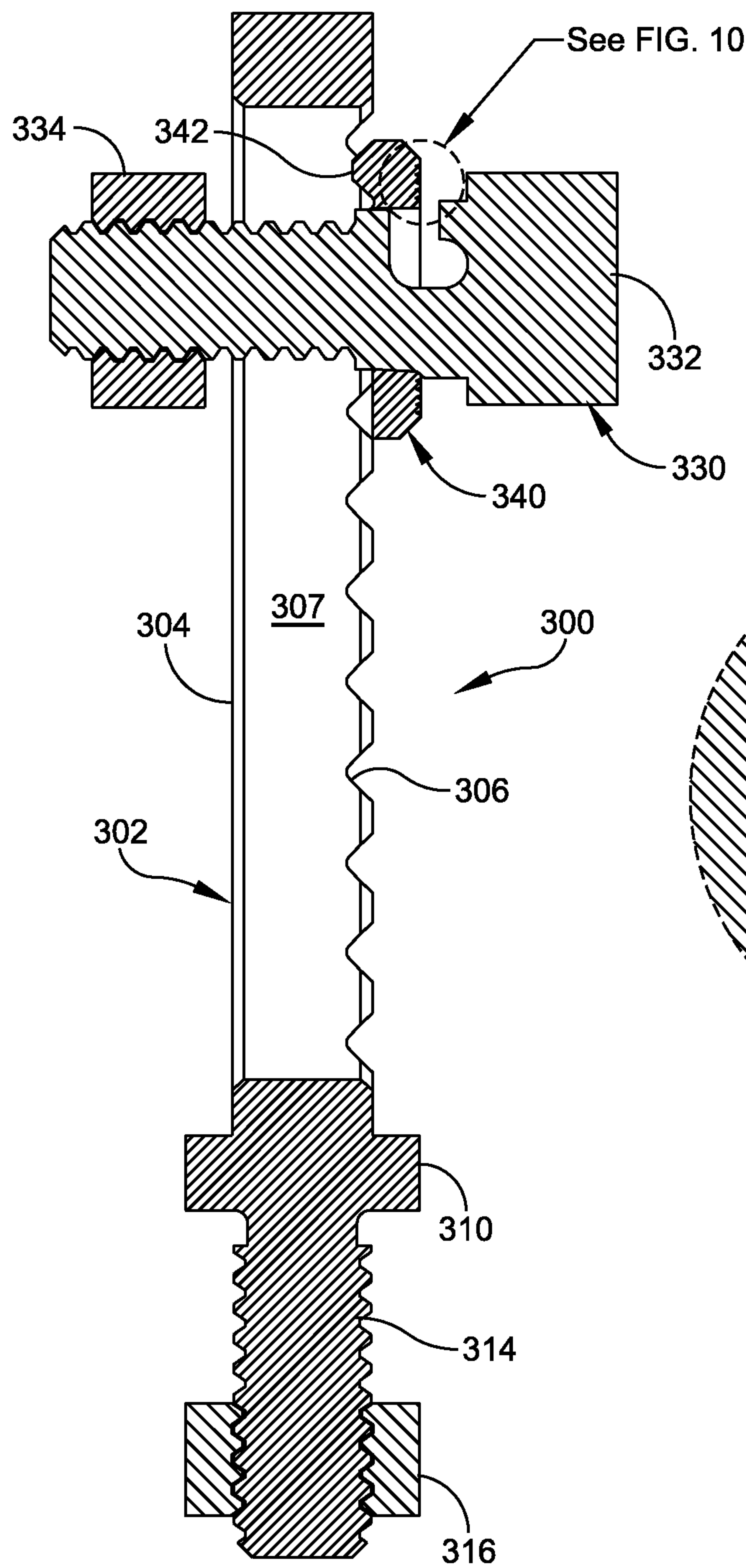


FIG. 9

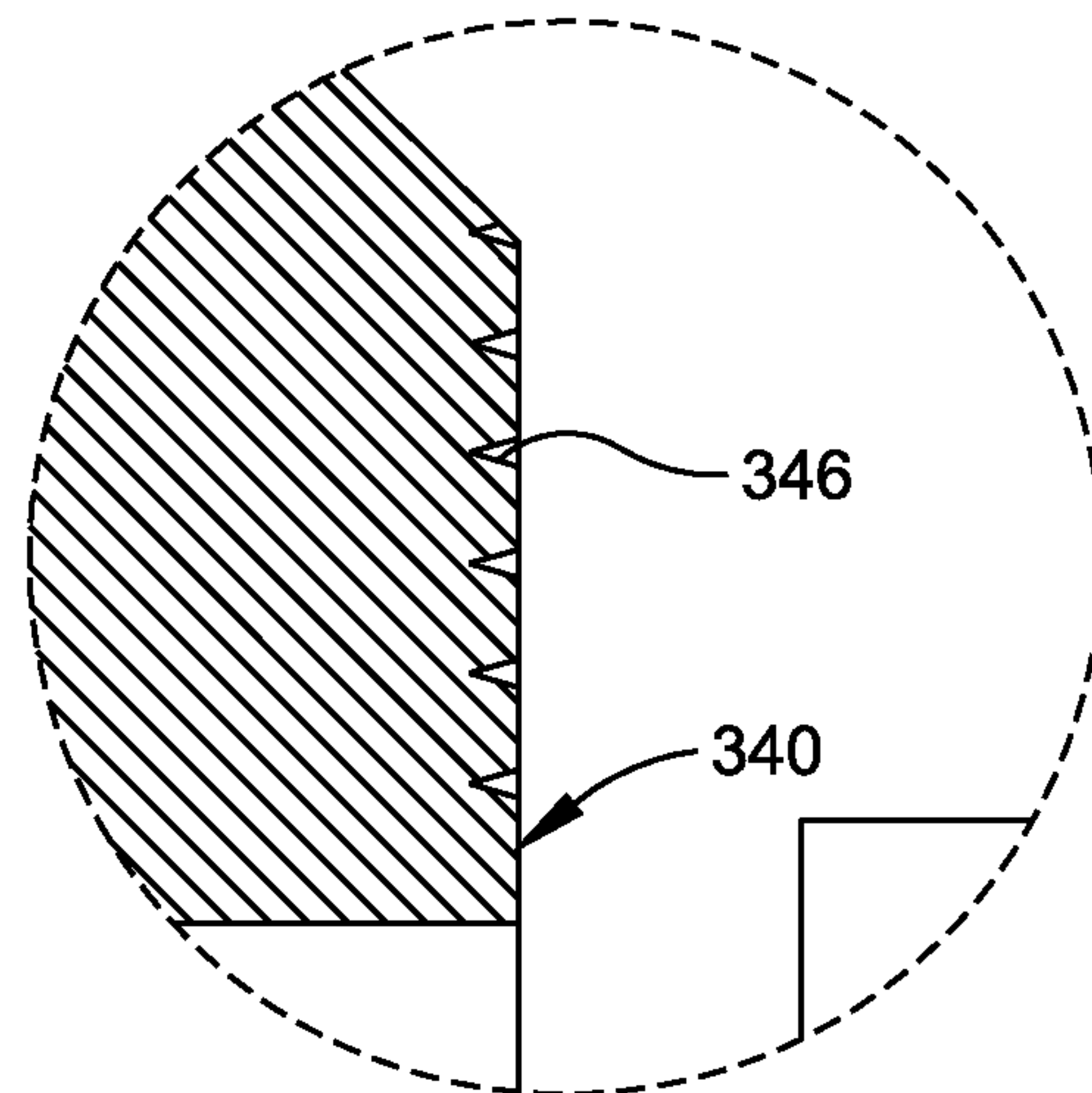


FIG. 10

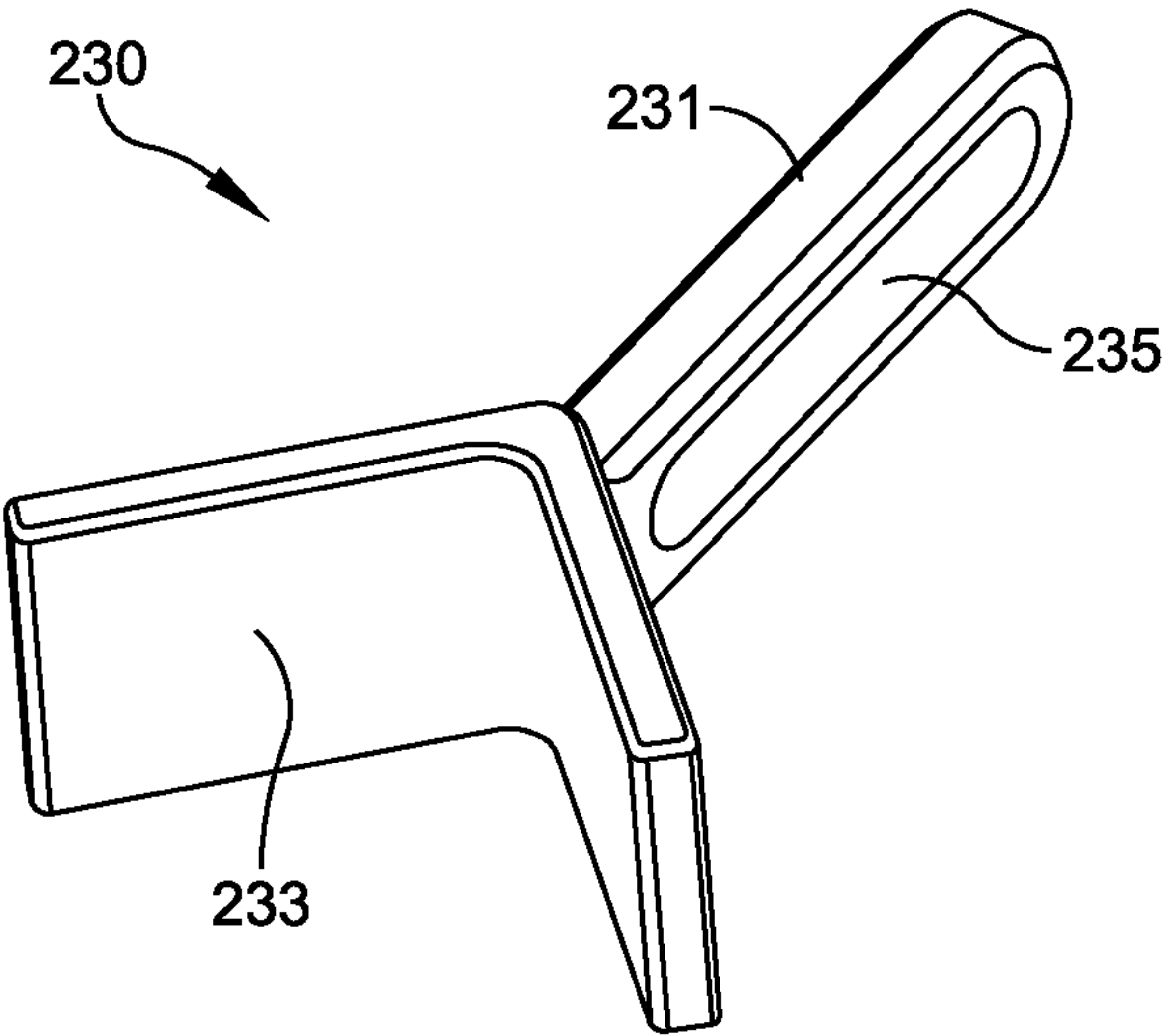


FIG. 11A

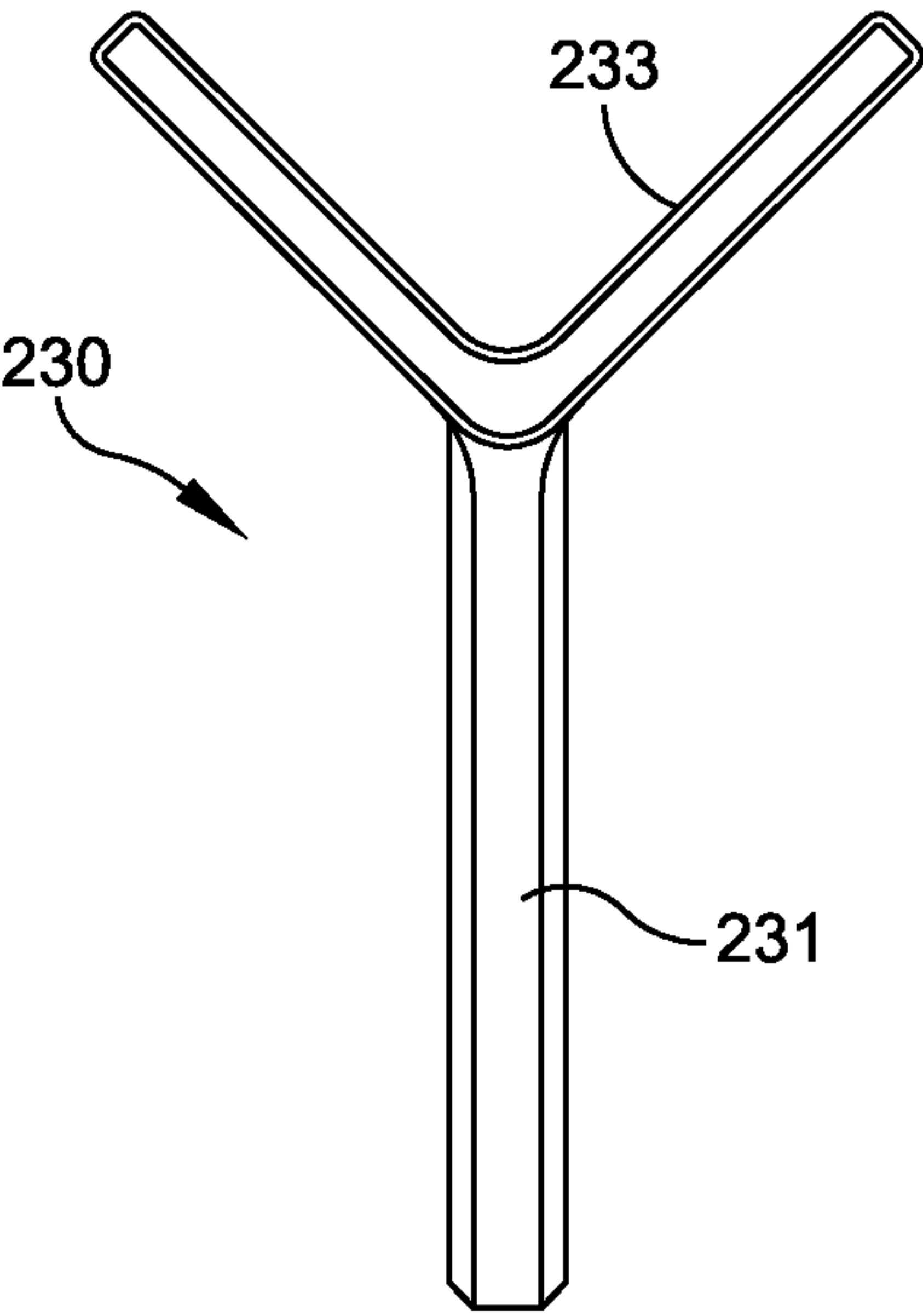


FIG. 11B



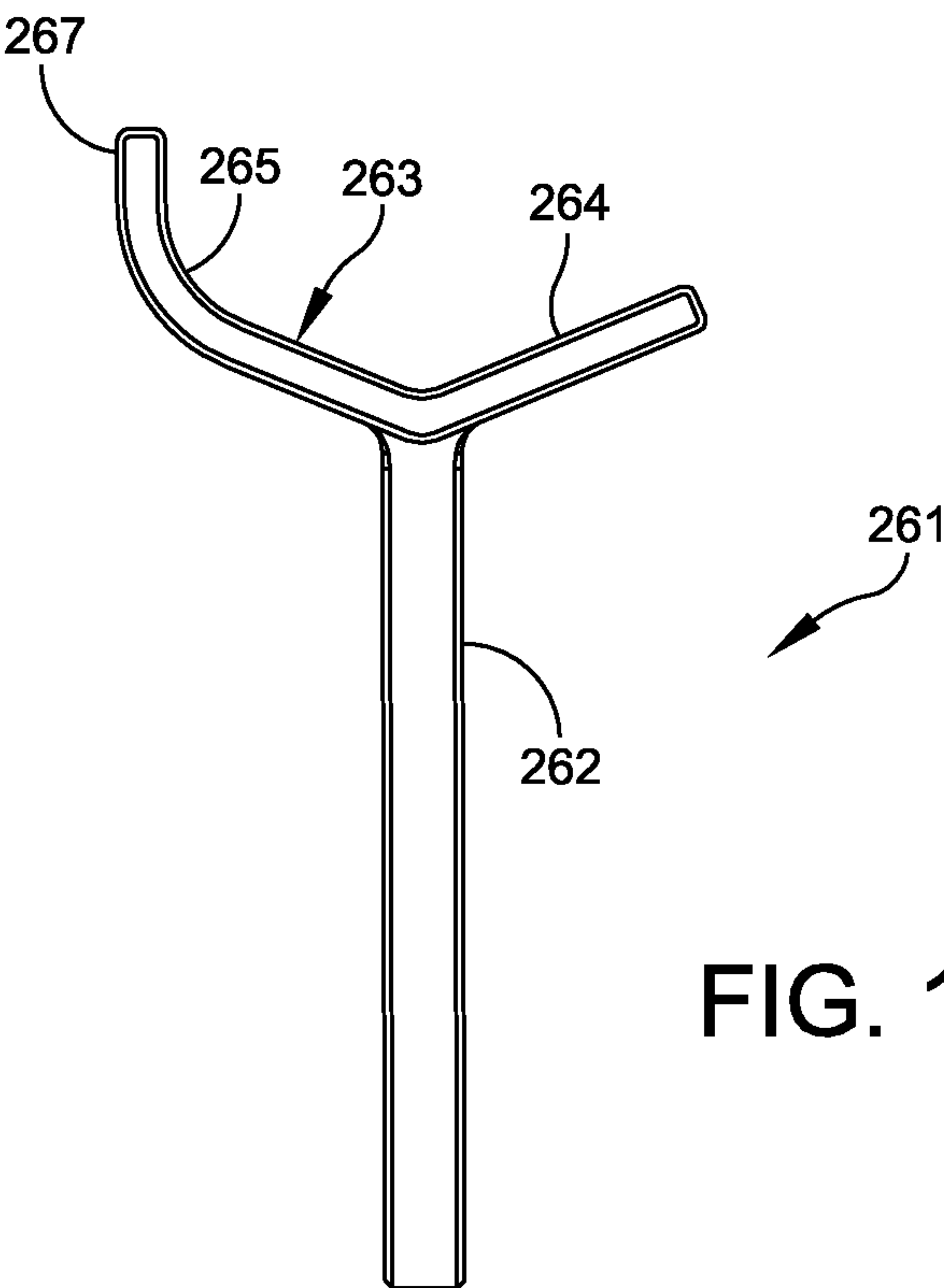


FIG. 12A

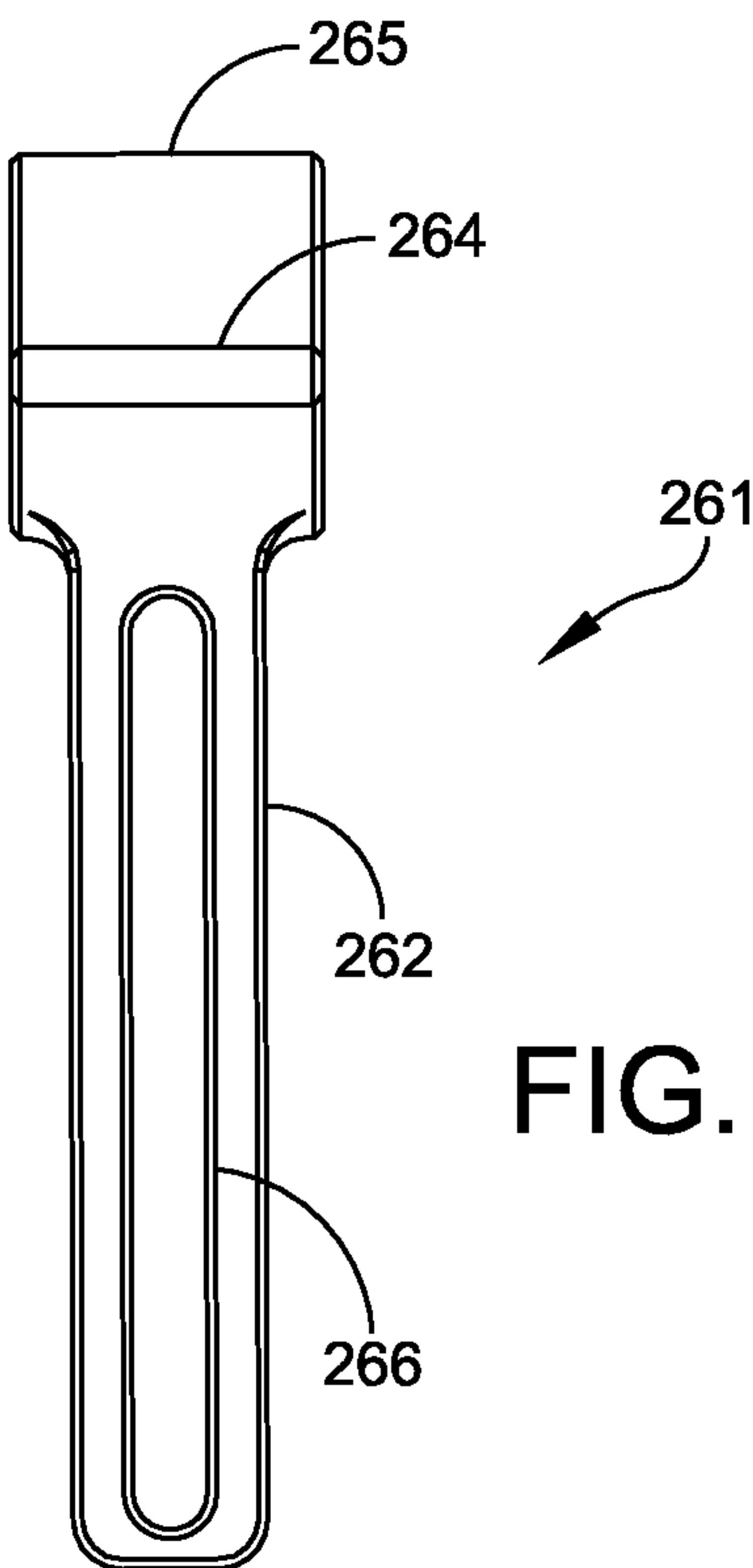


FIG. 12B

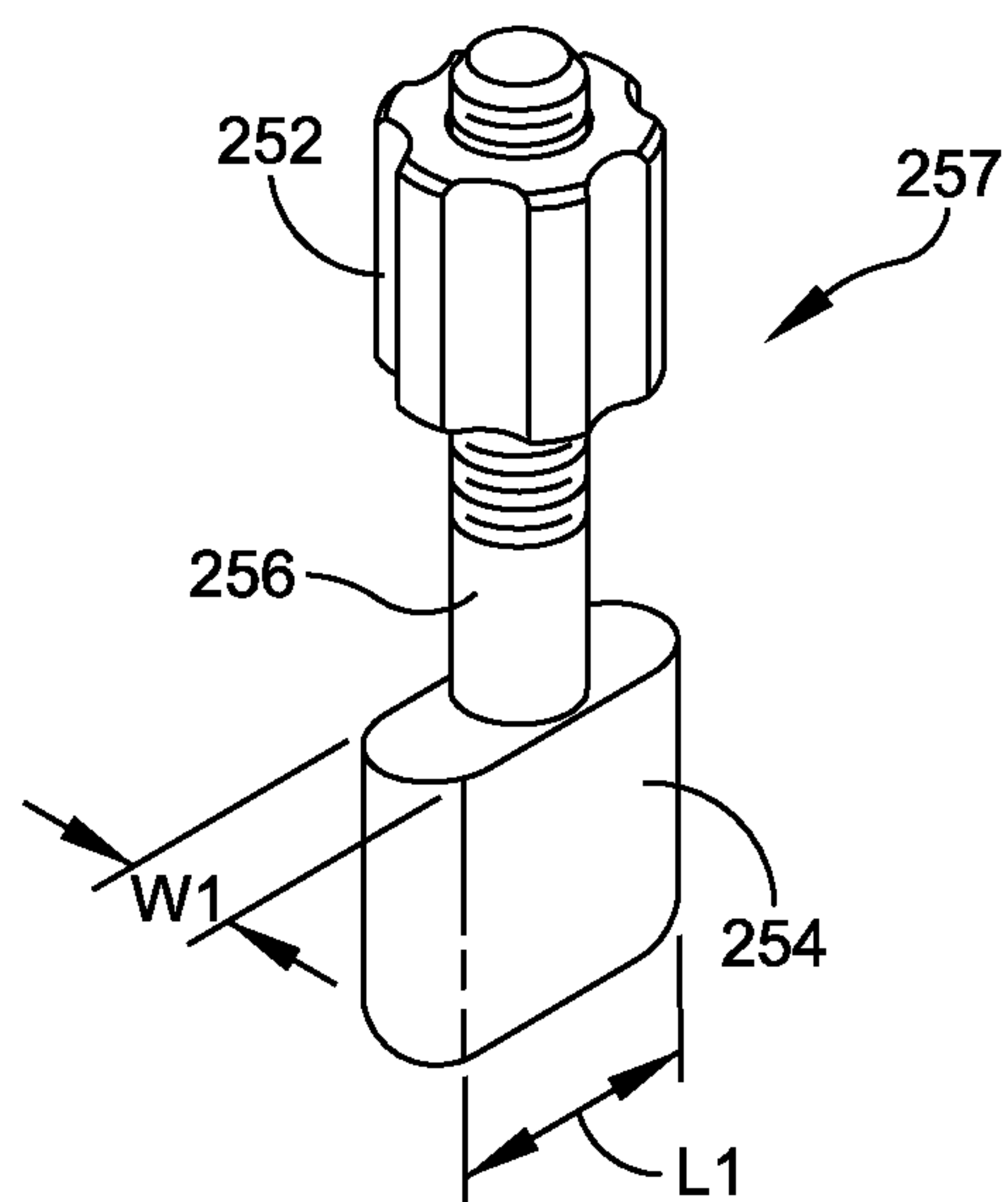


FIG. 13

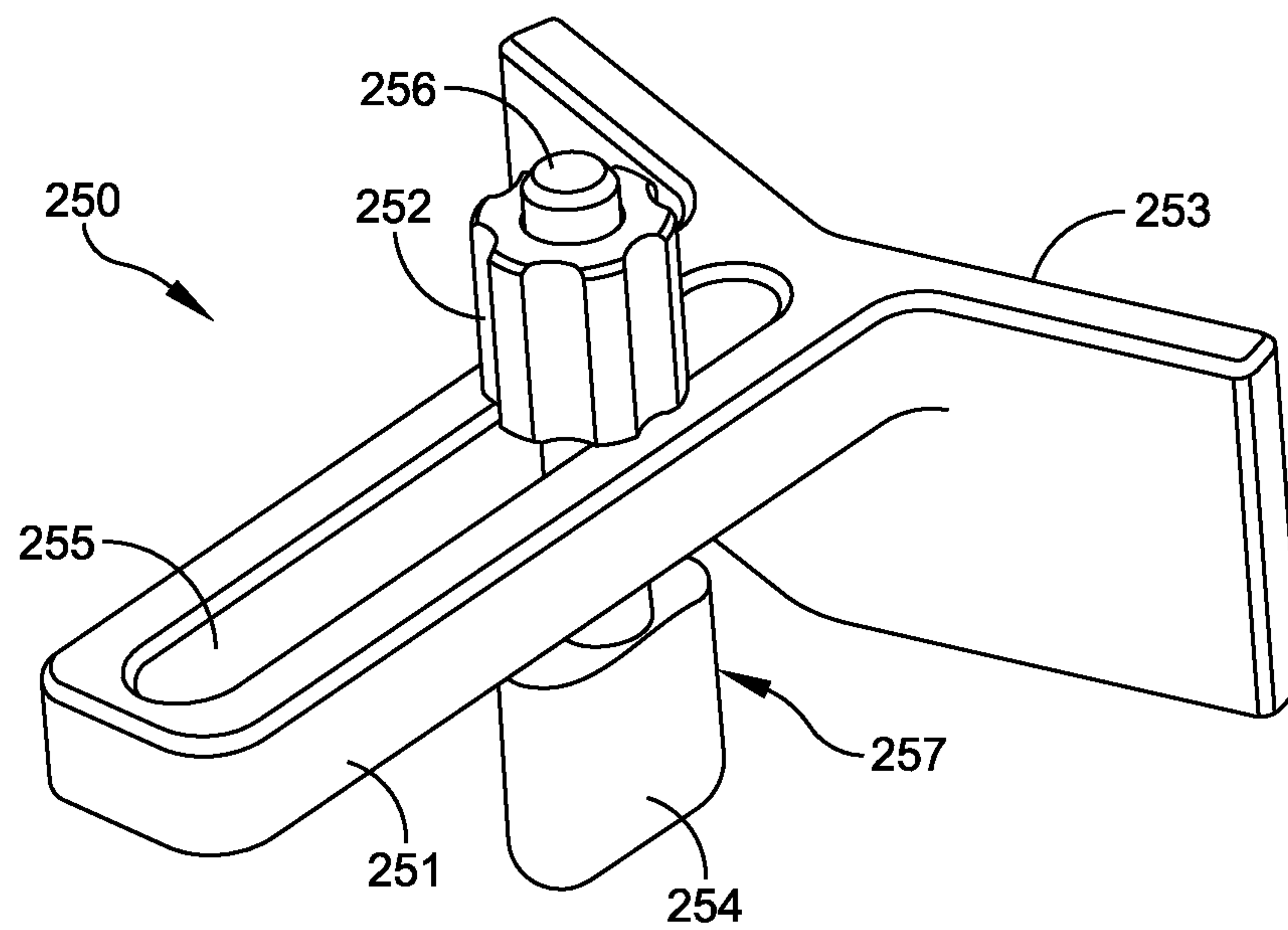


FIG. 14

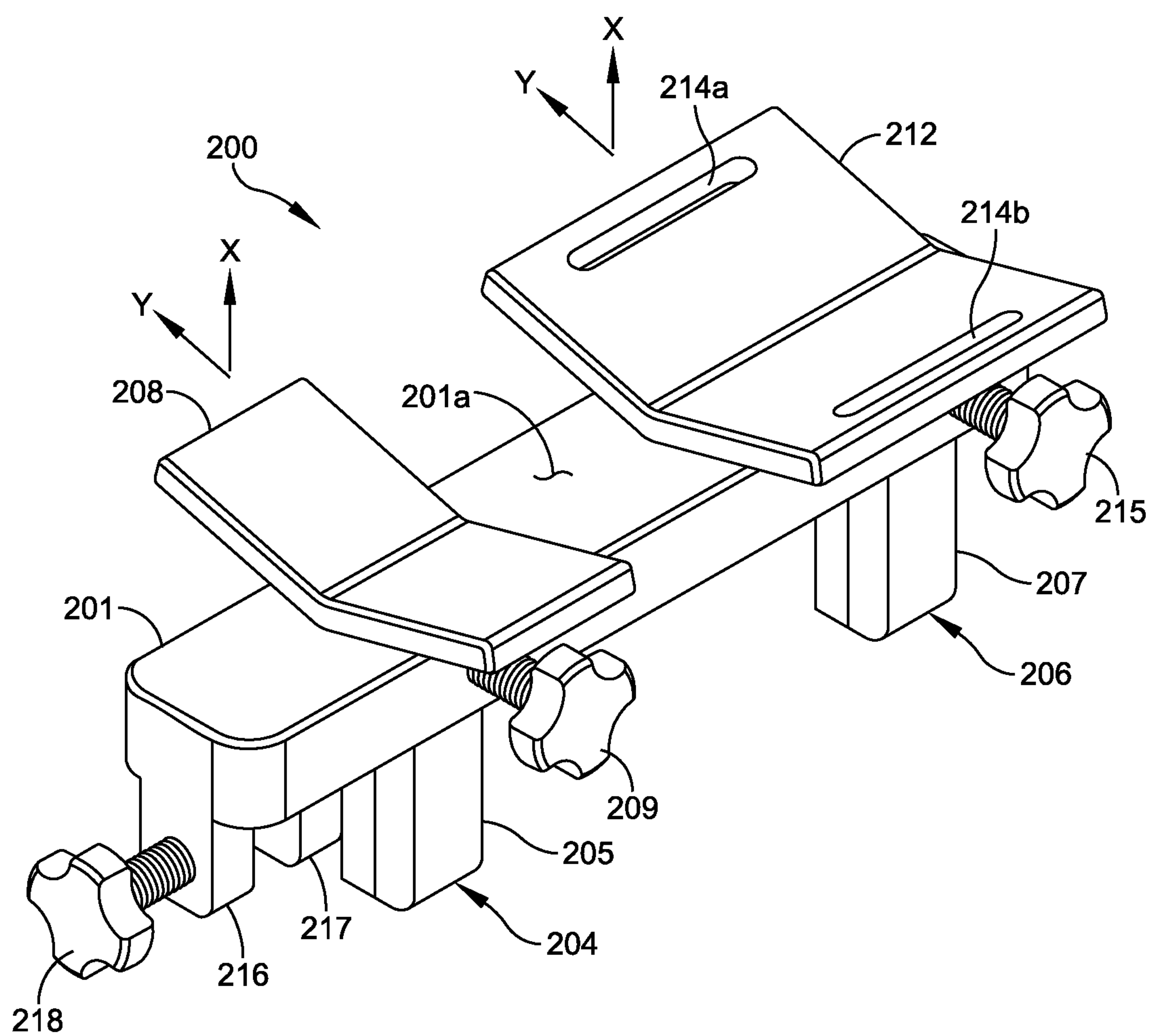


FIG. 15



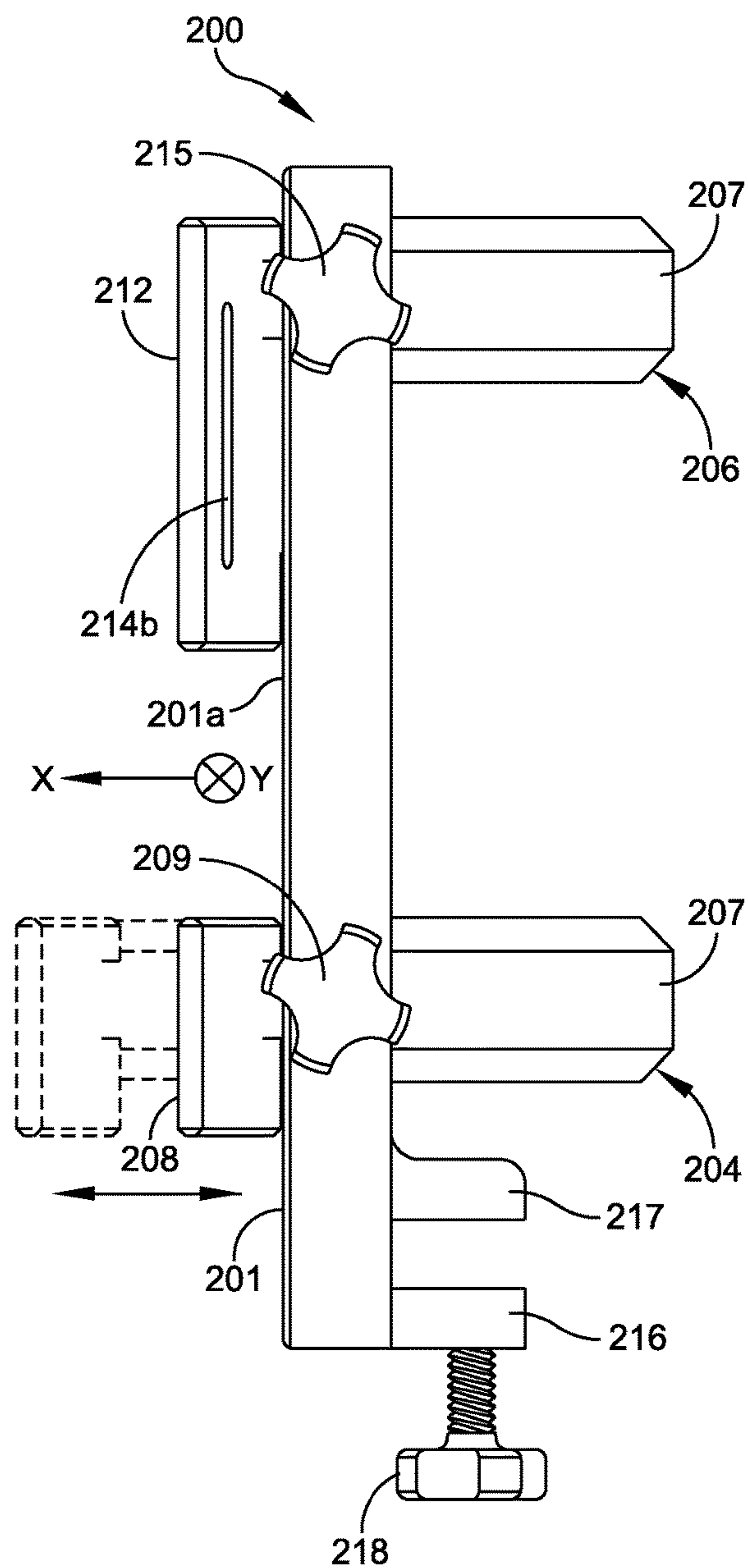


FIG. 16A

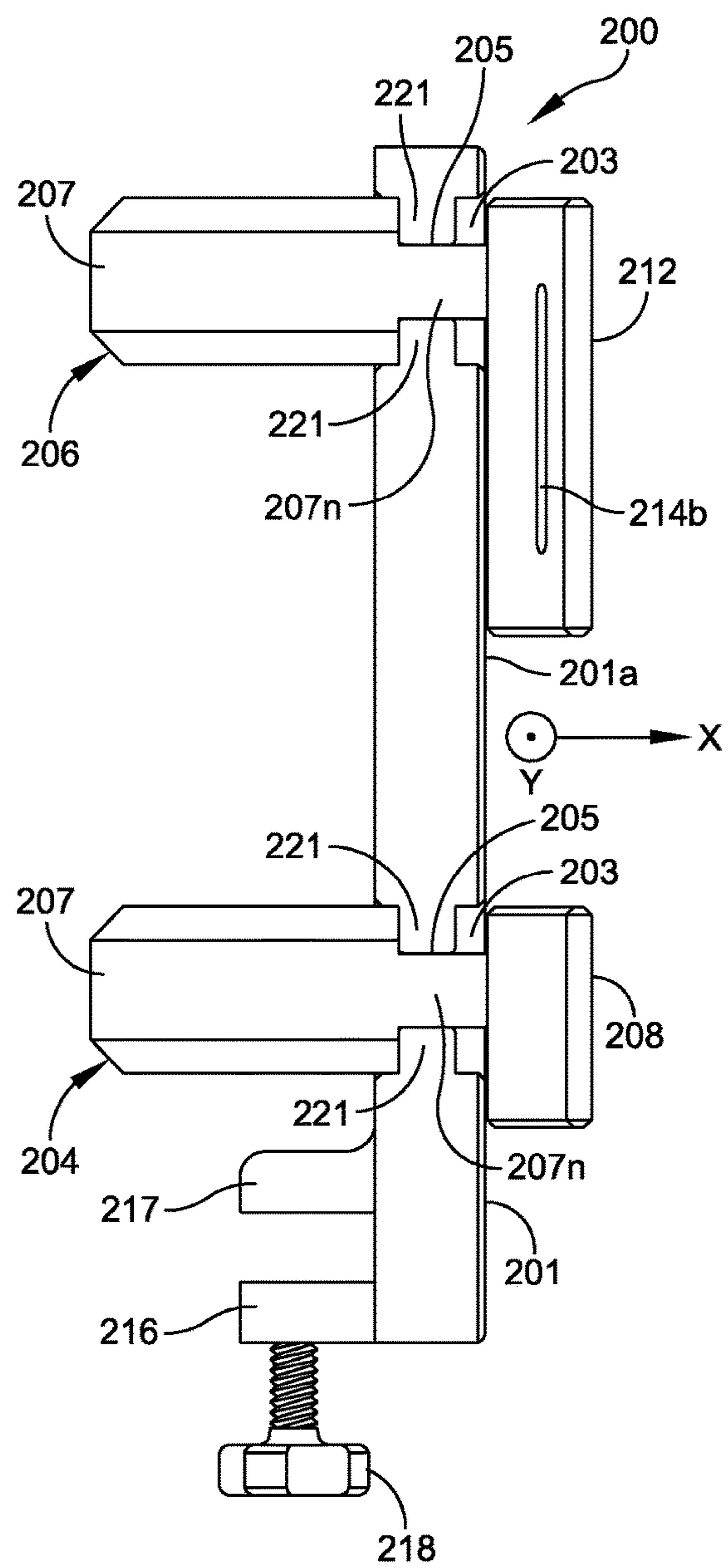
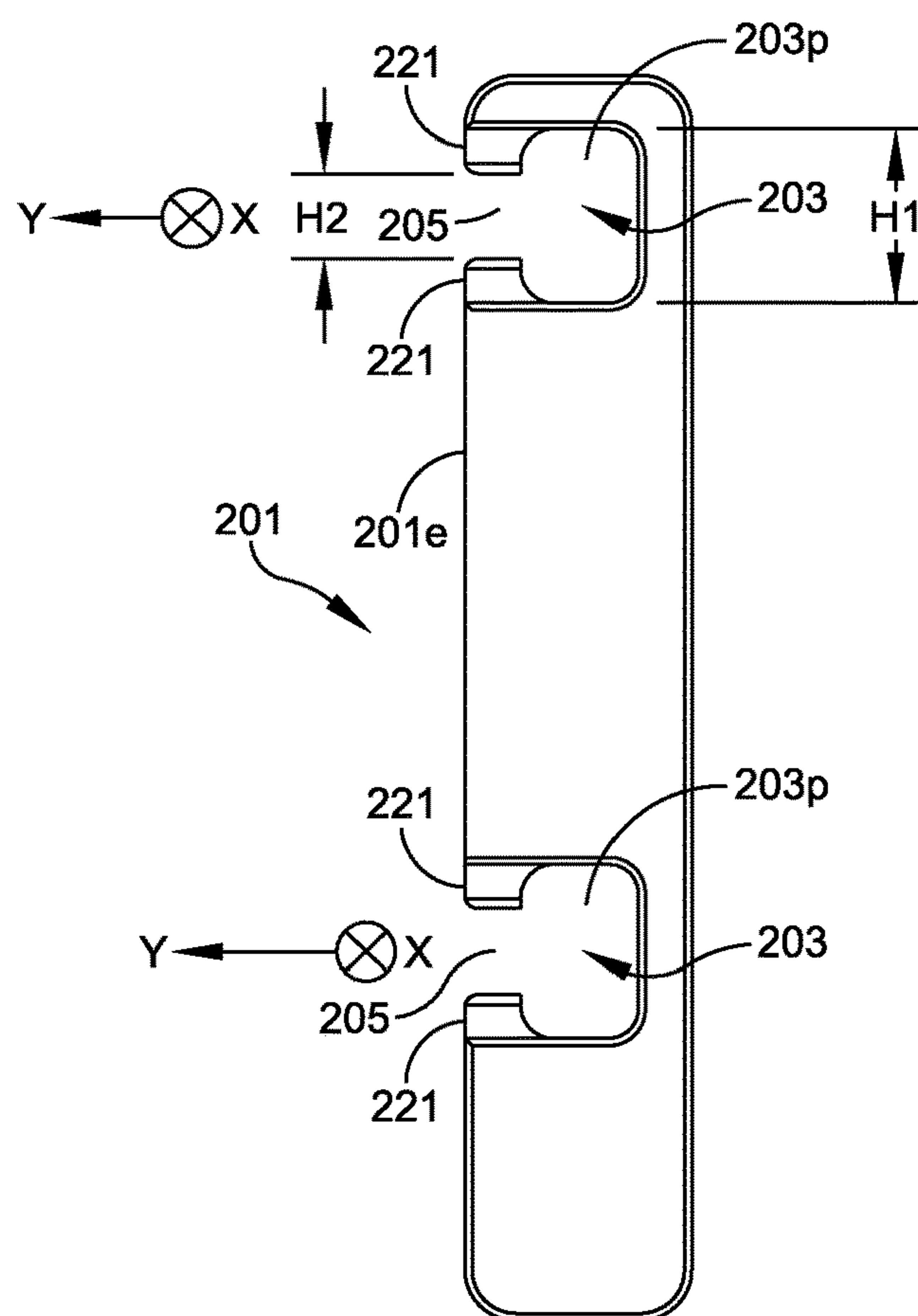
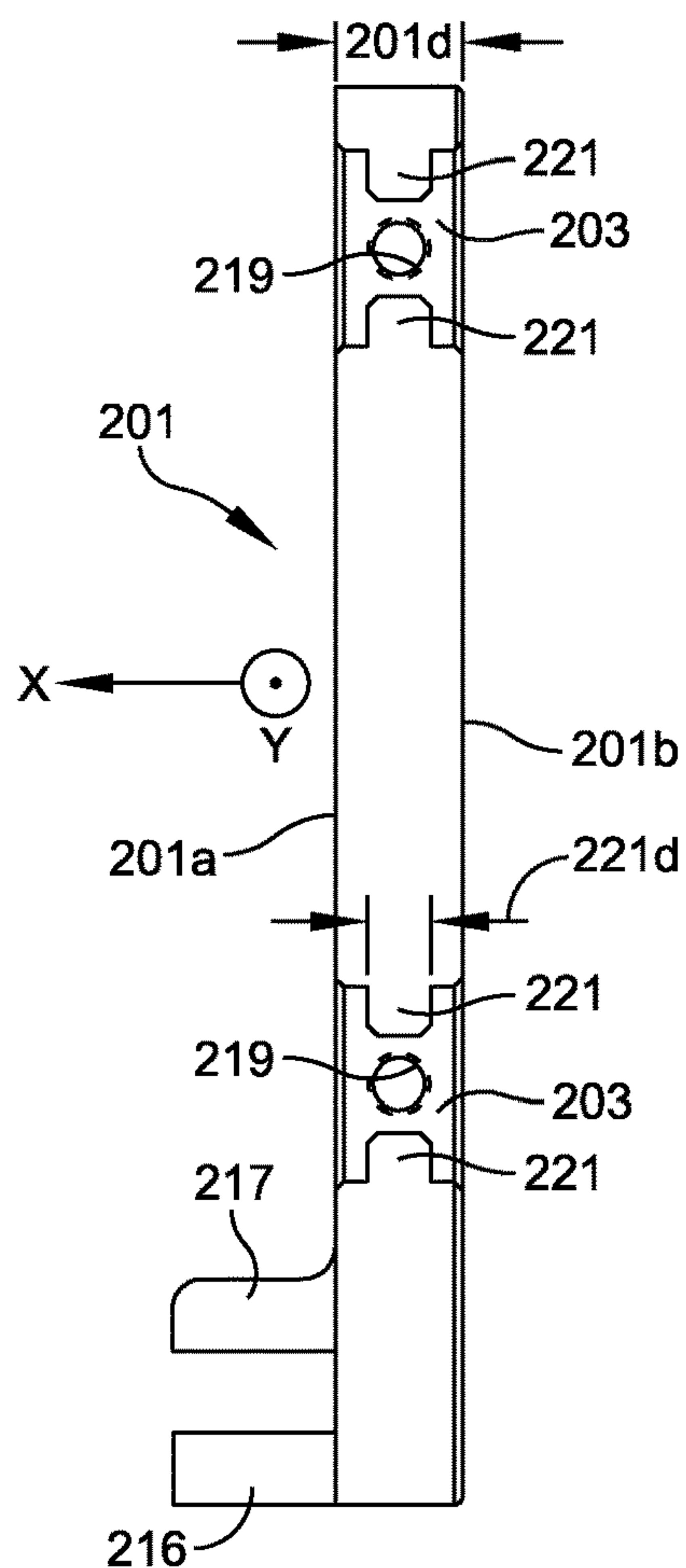
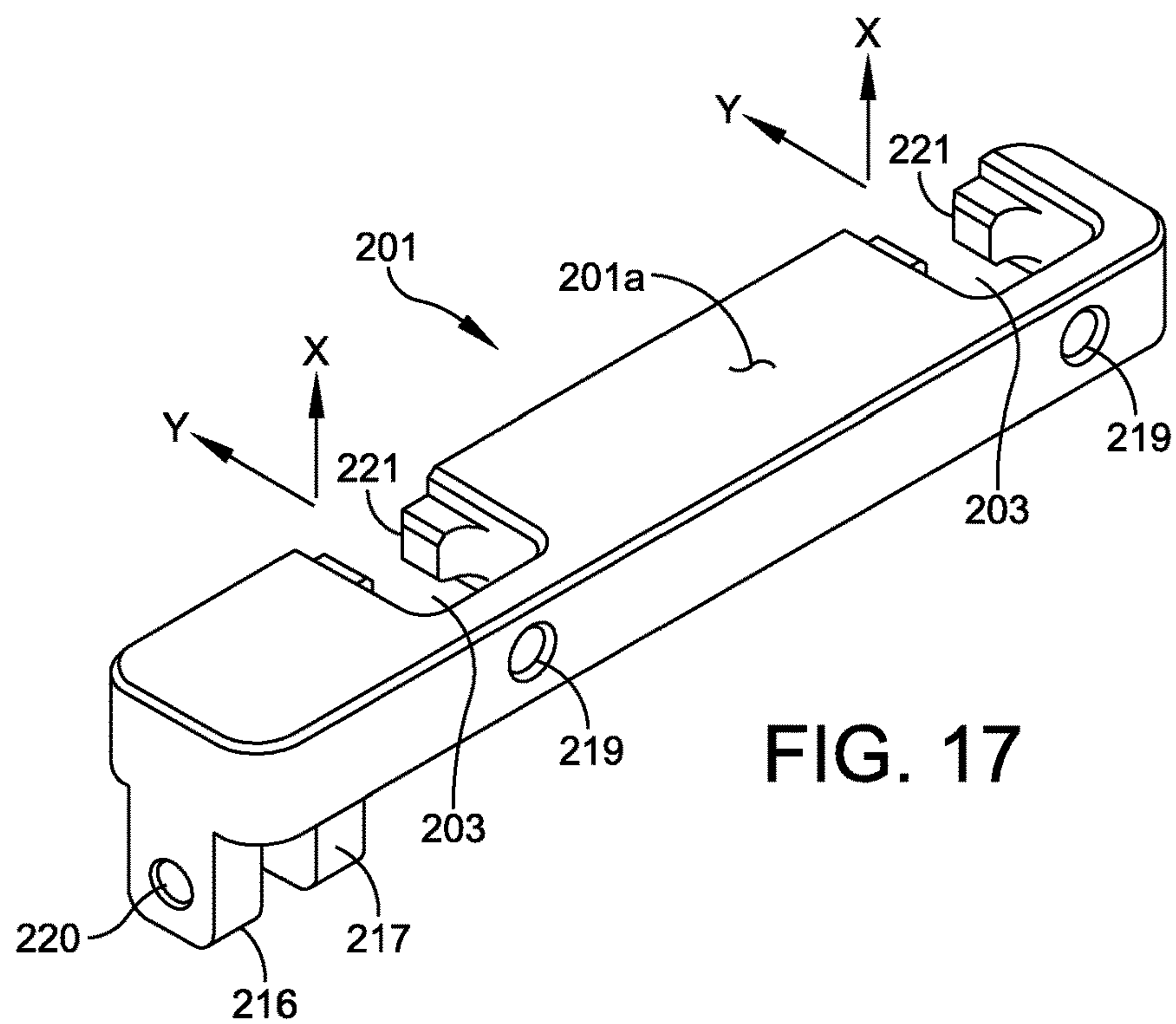


FIG. 16B



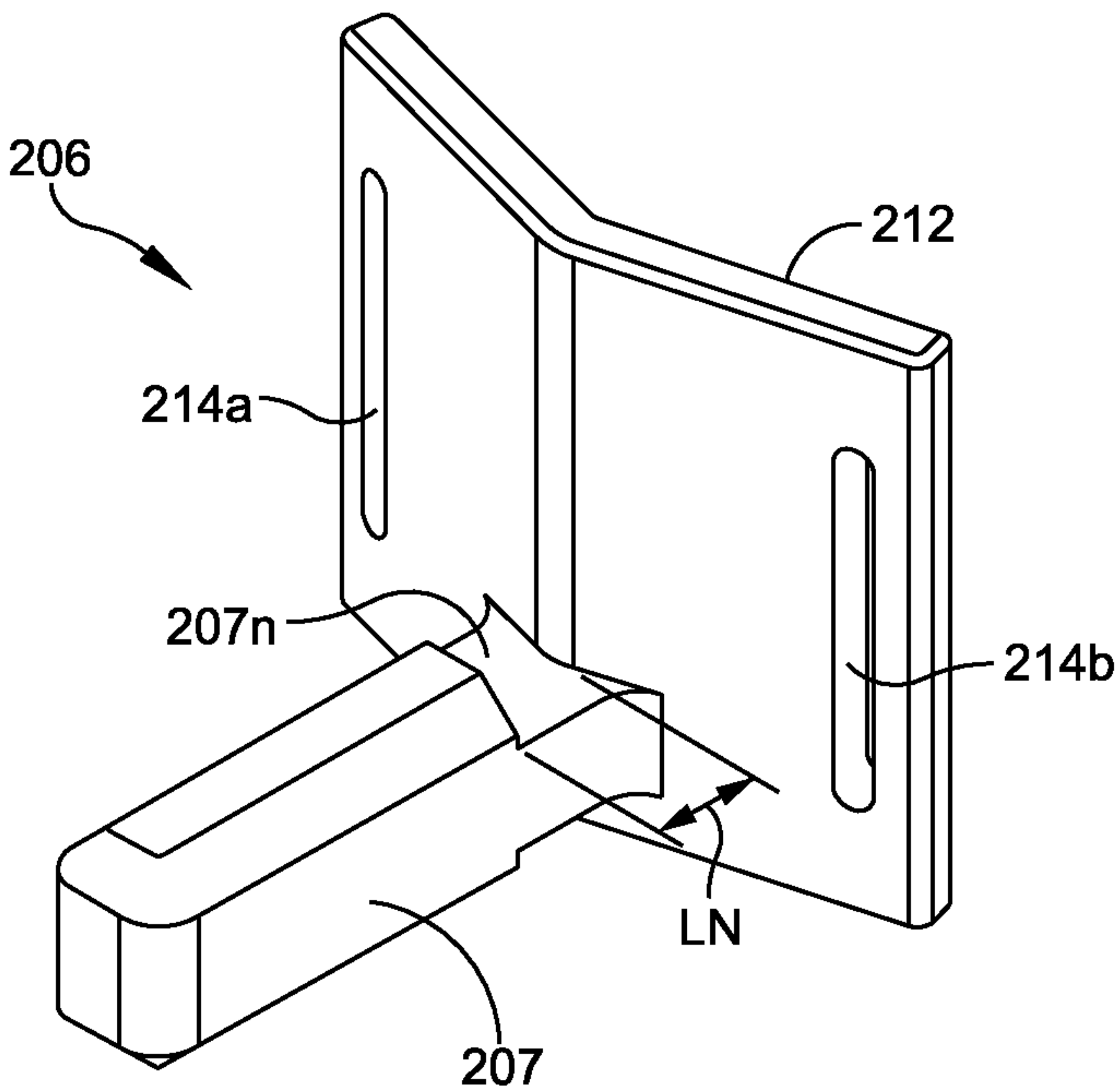


FIG. 20

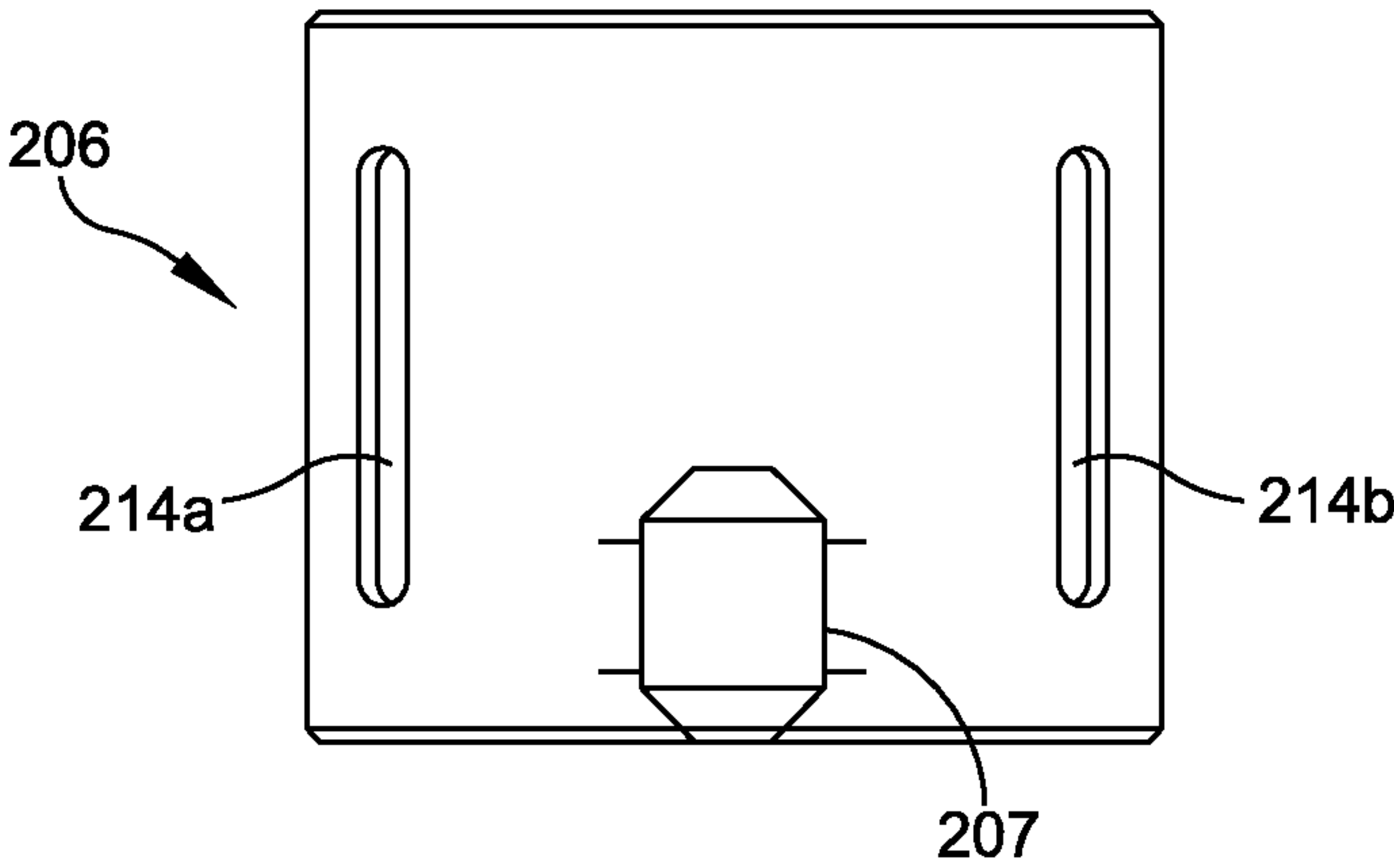


FIG. 21



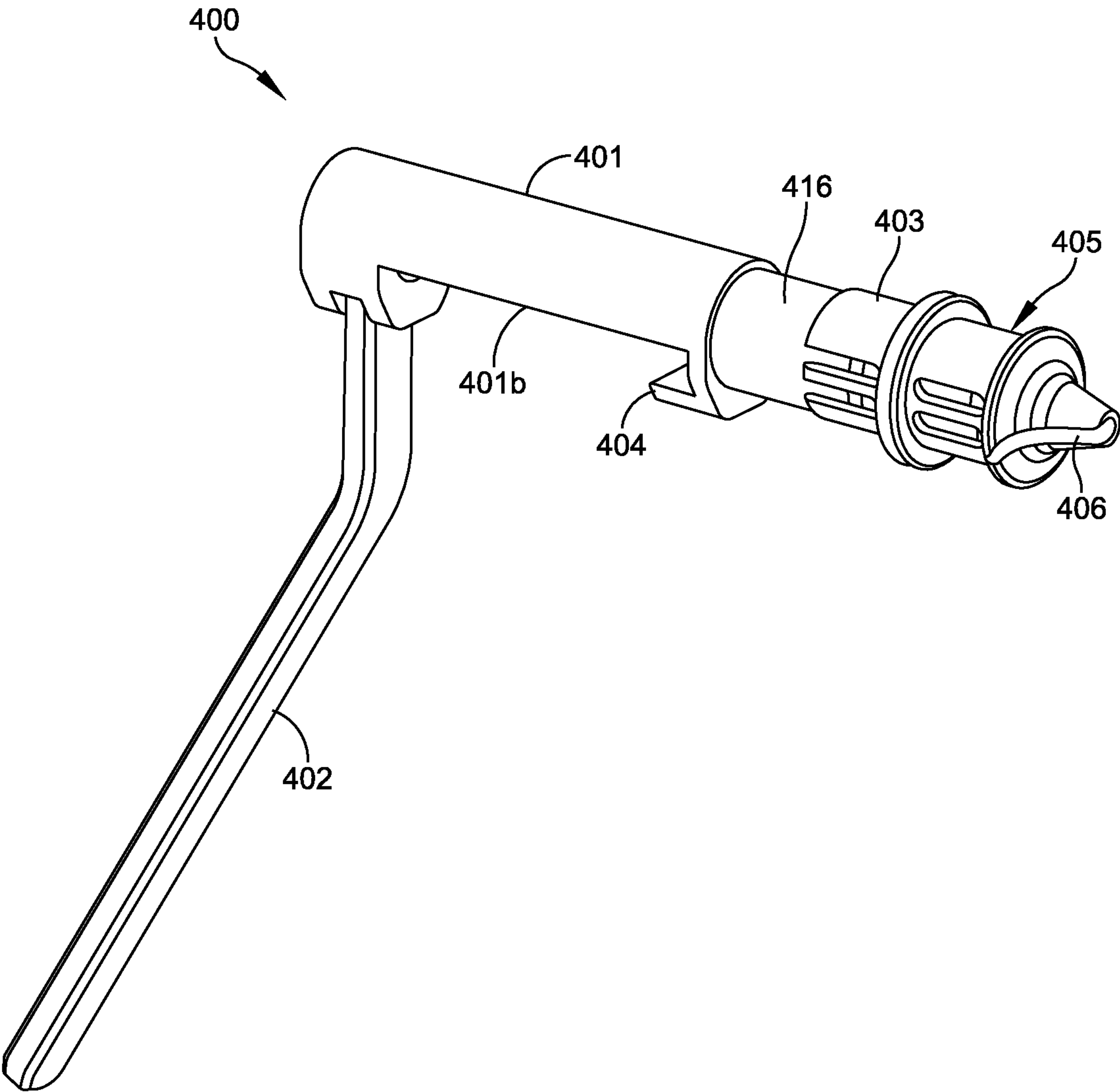


FIG. 22

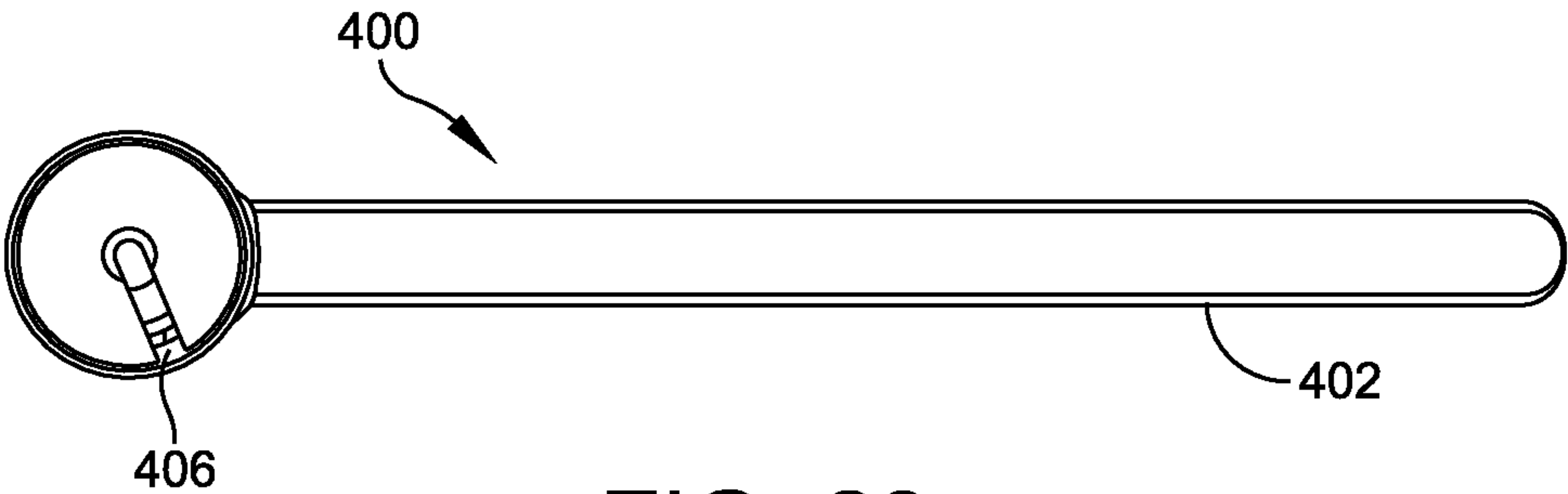


FIG. 23

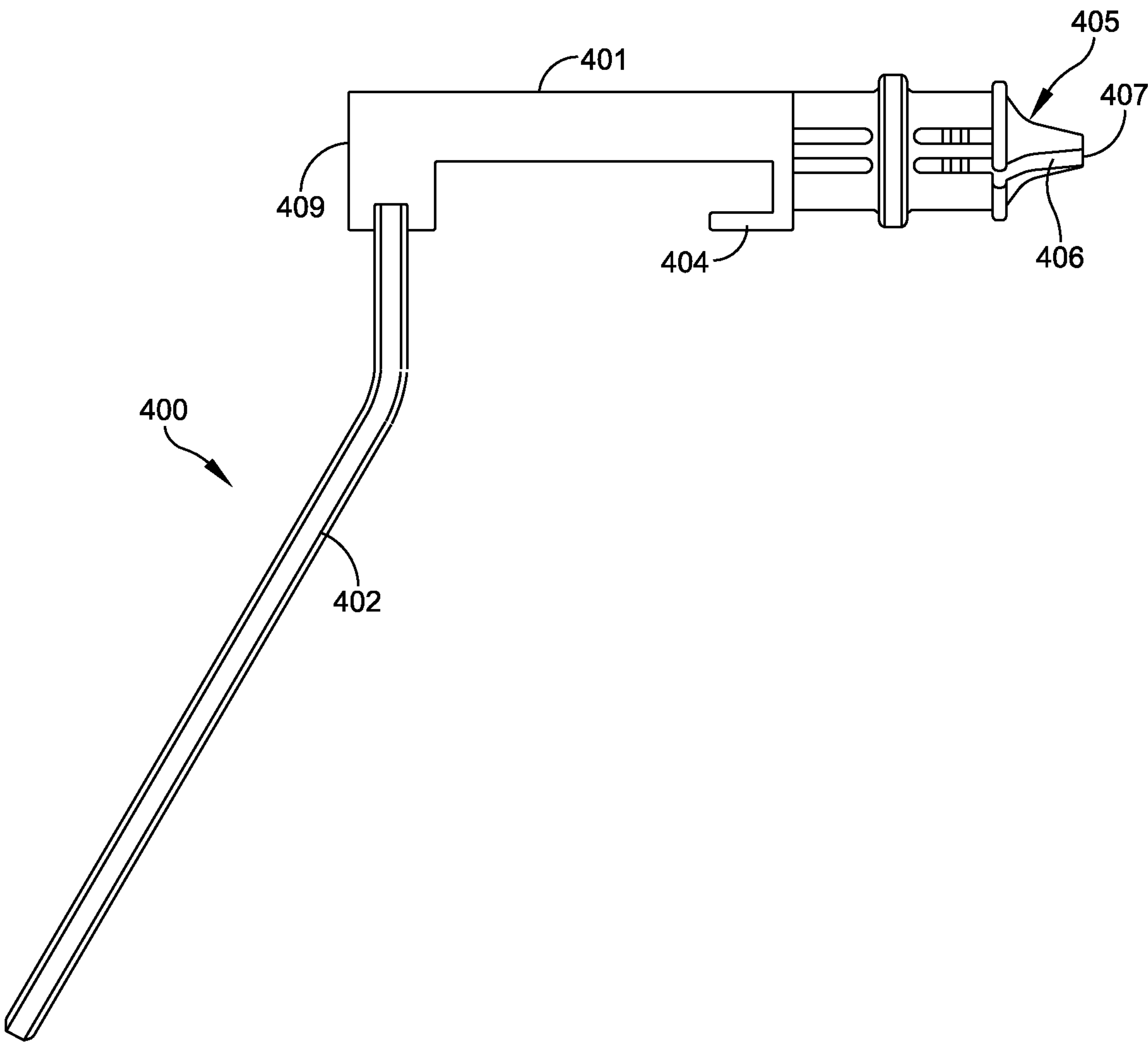


FIG. 24

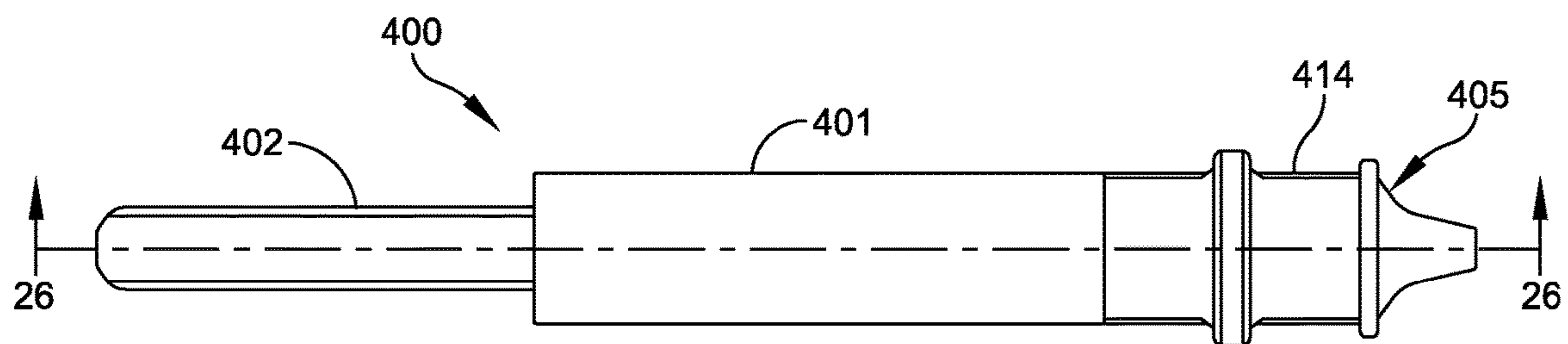


FIG. 25

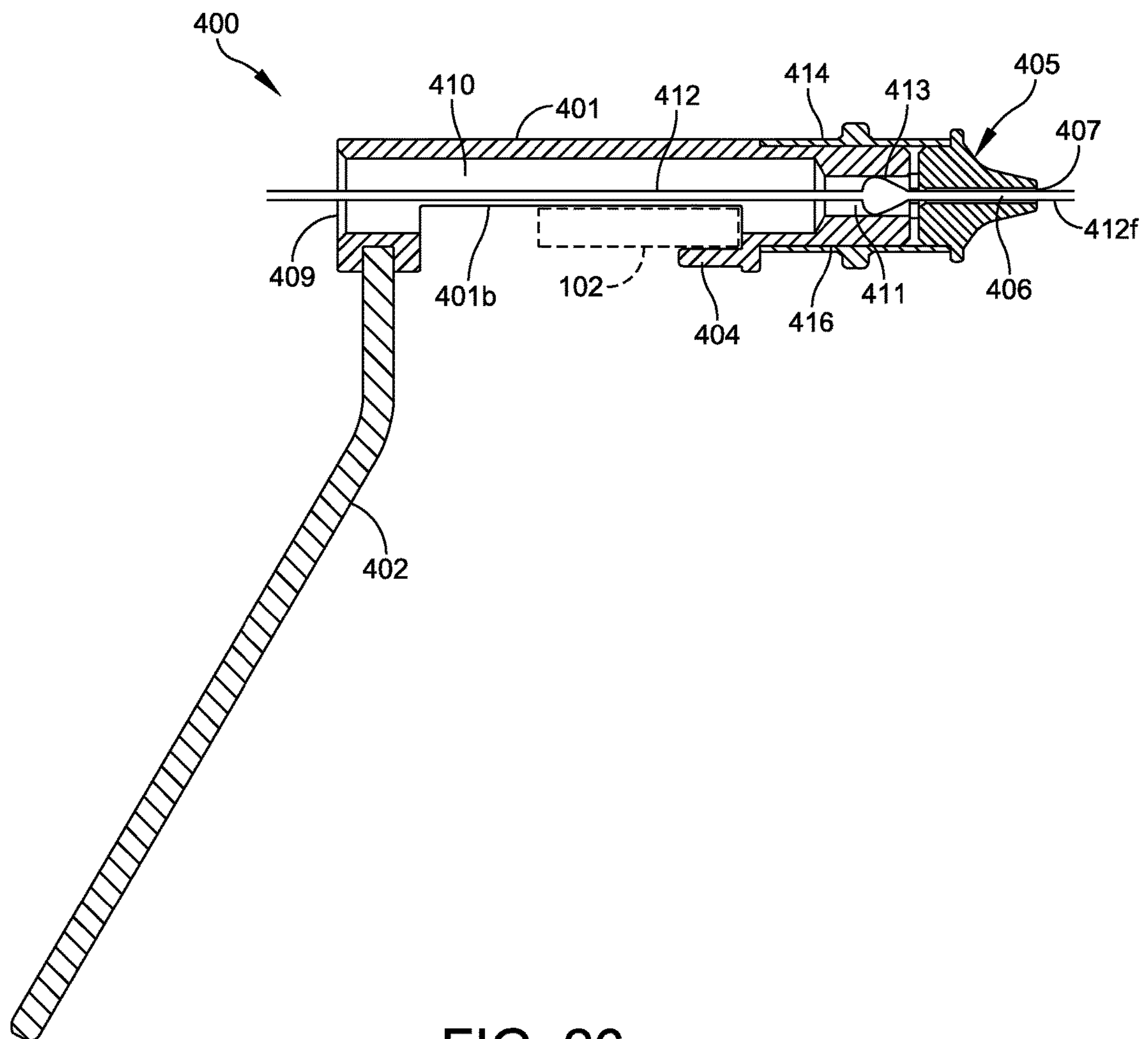


FIG. 26



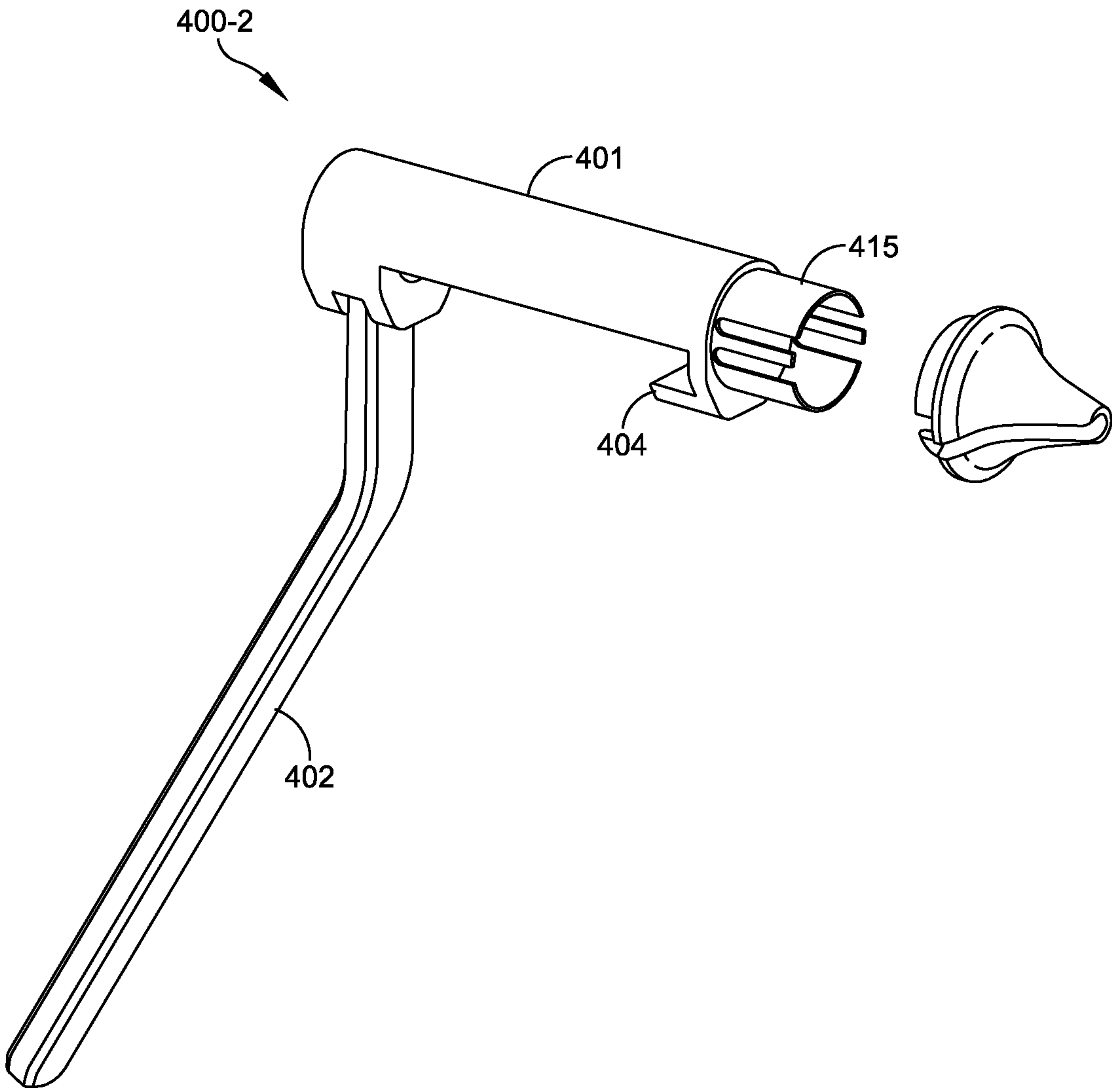


FIG. 27

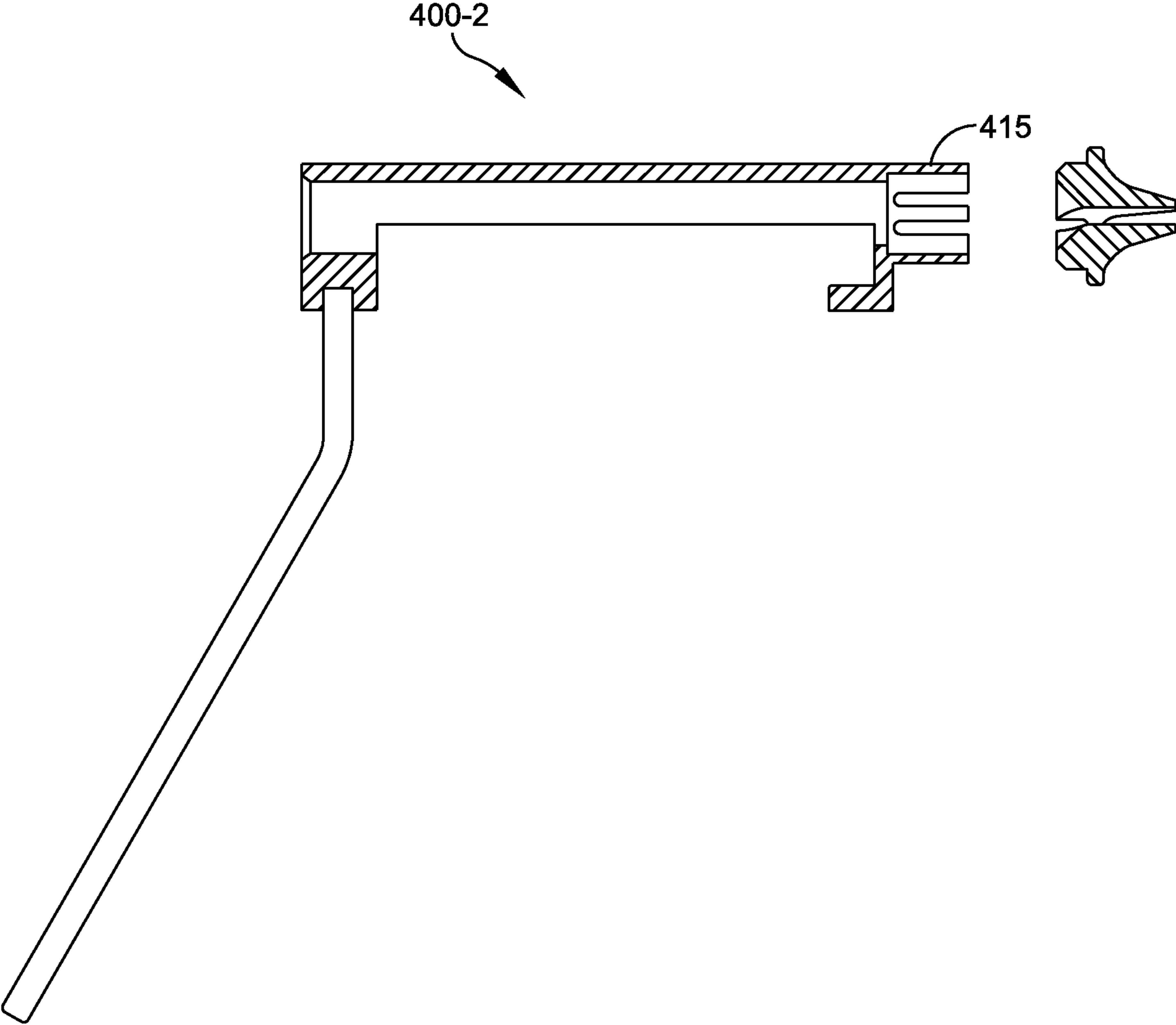


FIG. 28

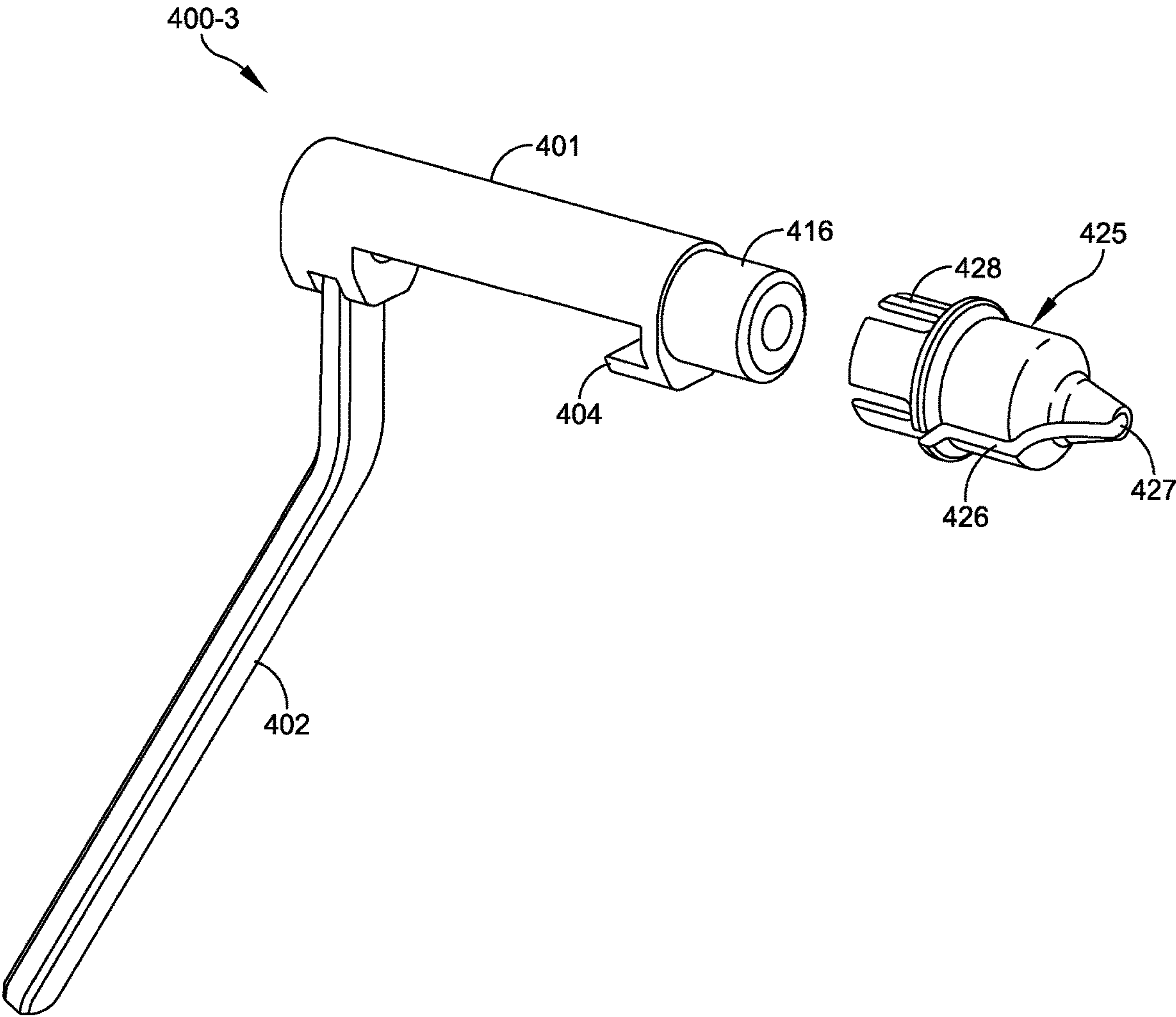


FIG. 29



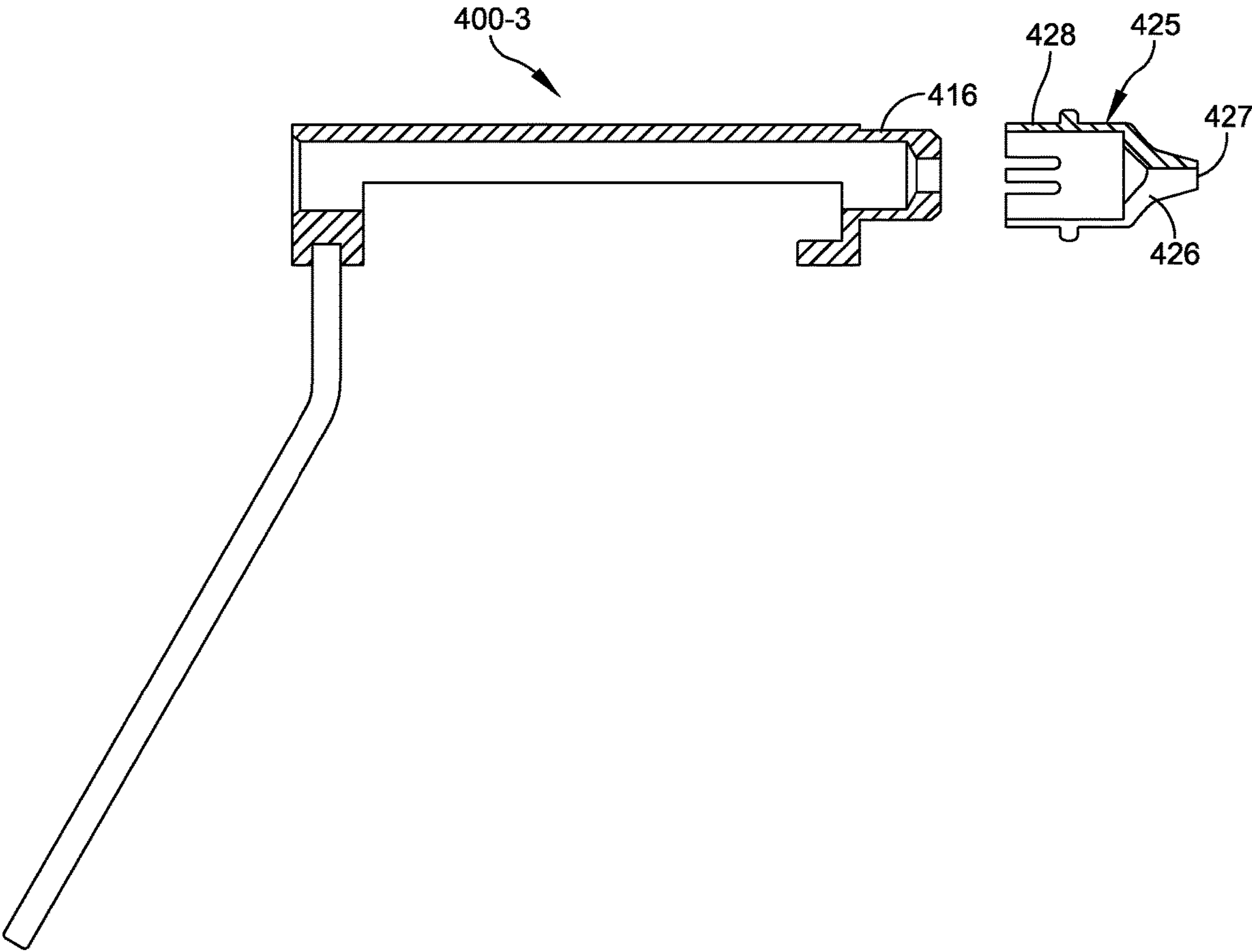


FIG. 30

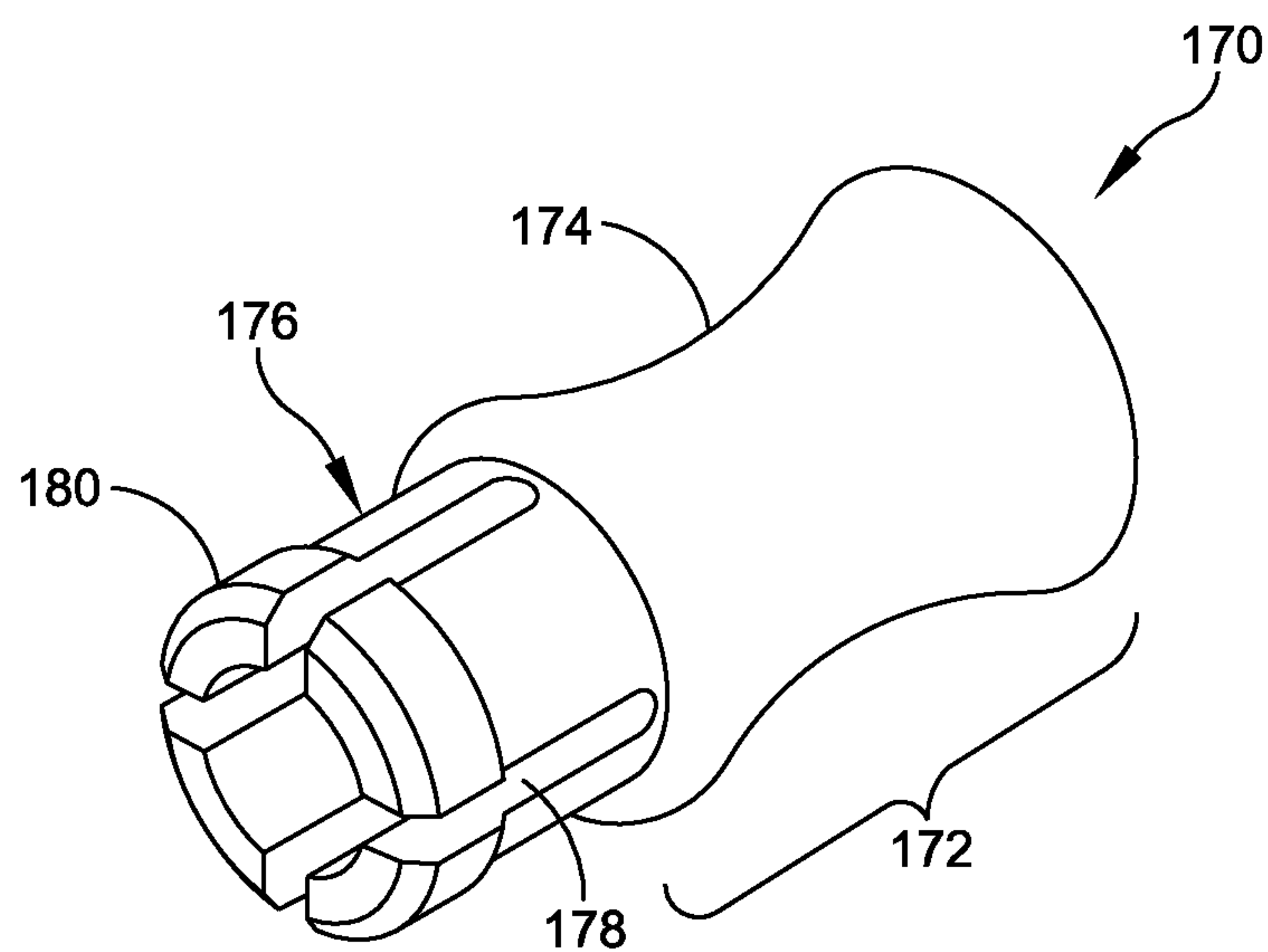


FIG. 31

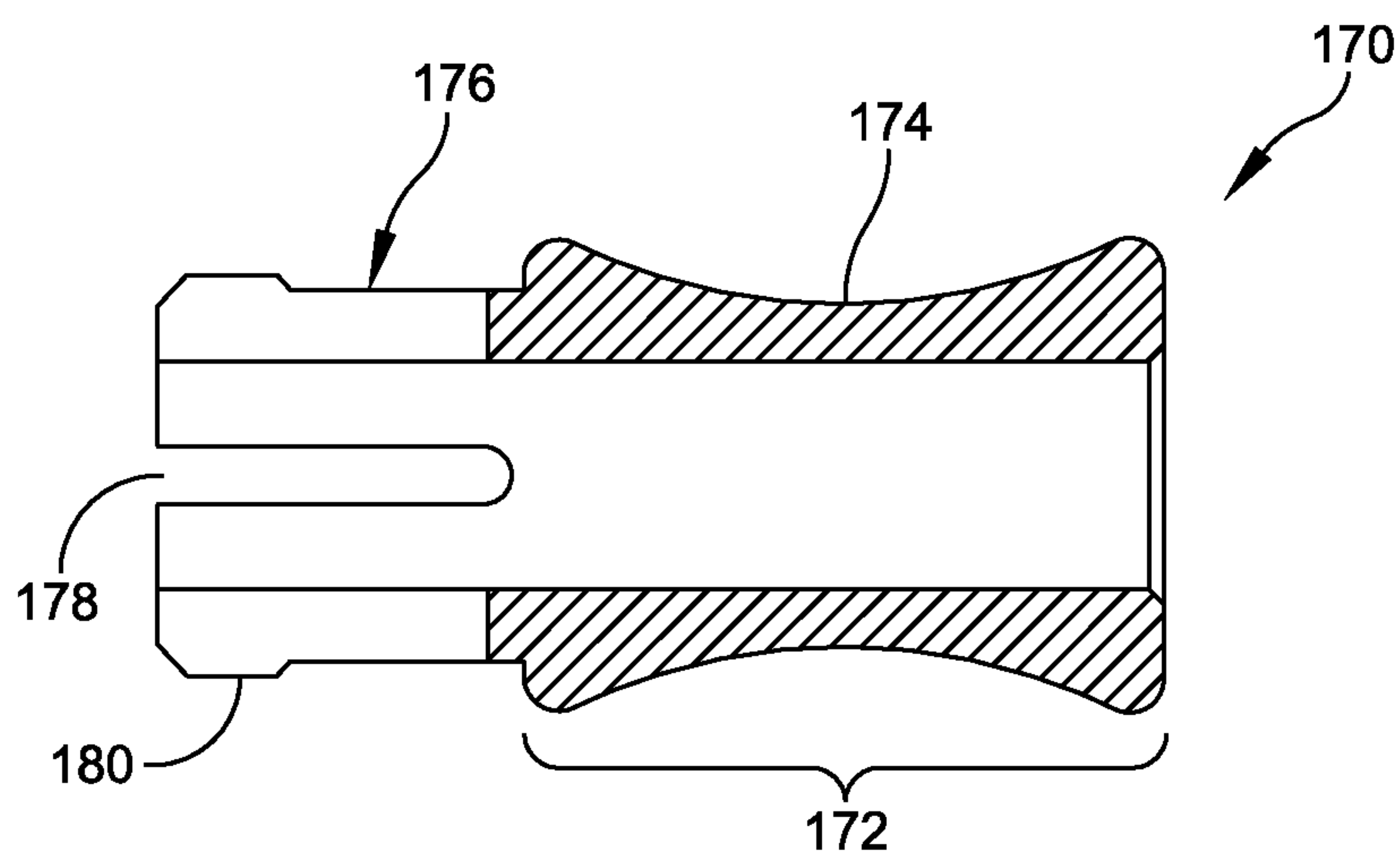


FIG. 32

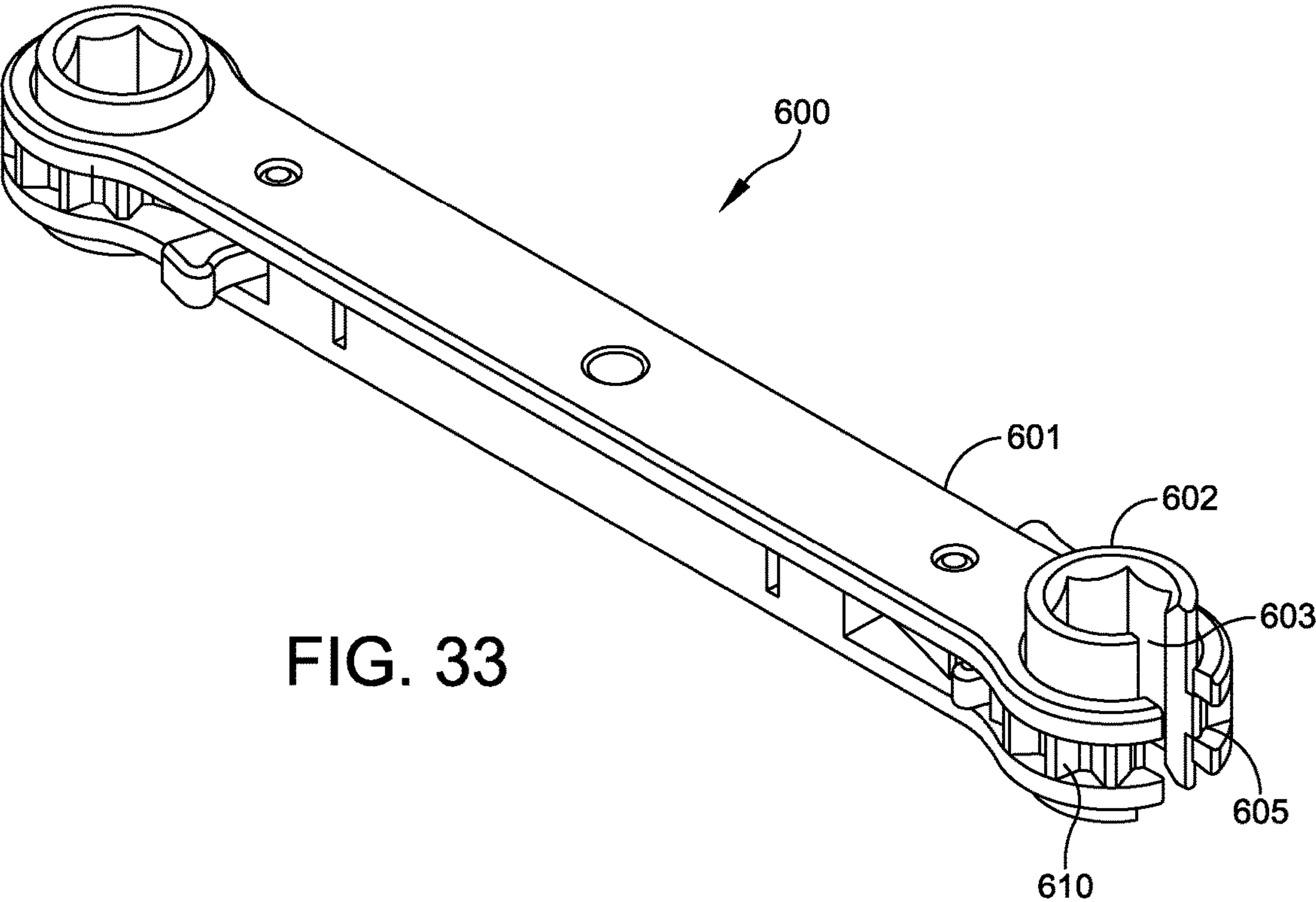


FIG. 33

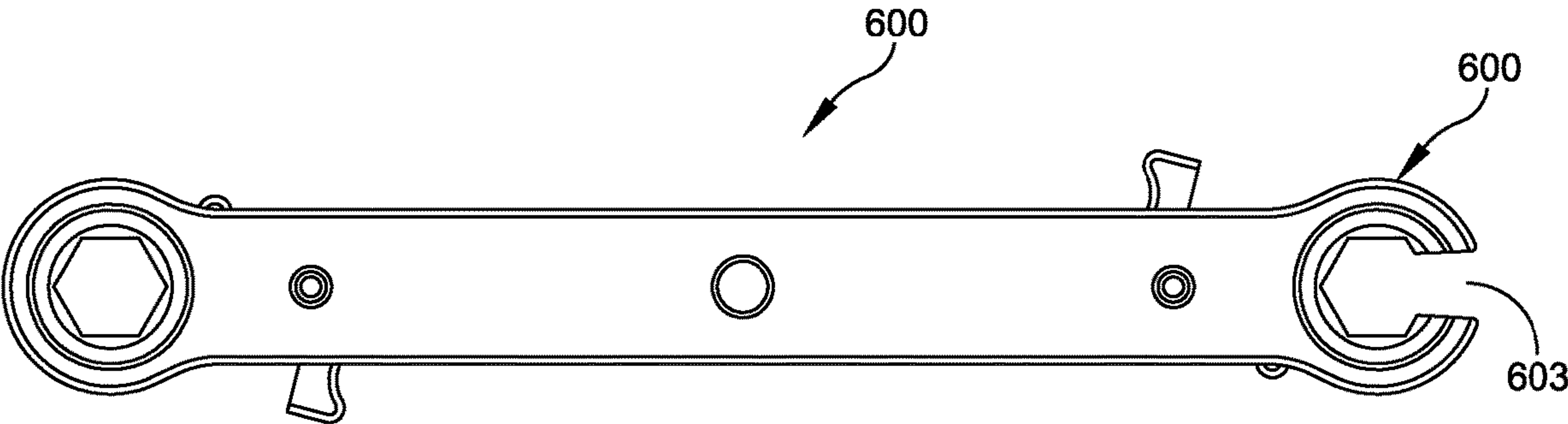


FIG. 34

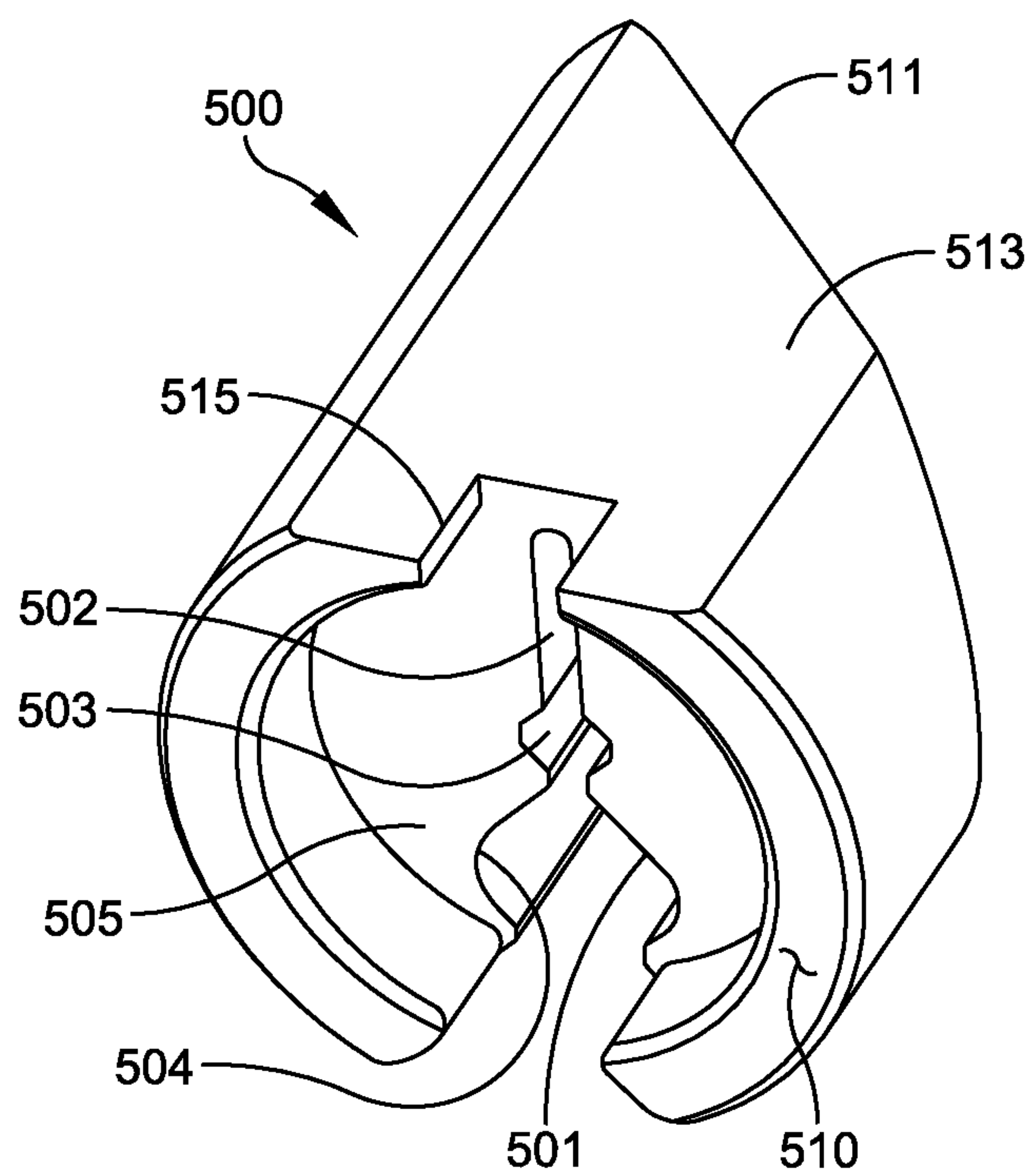


FIG. 35

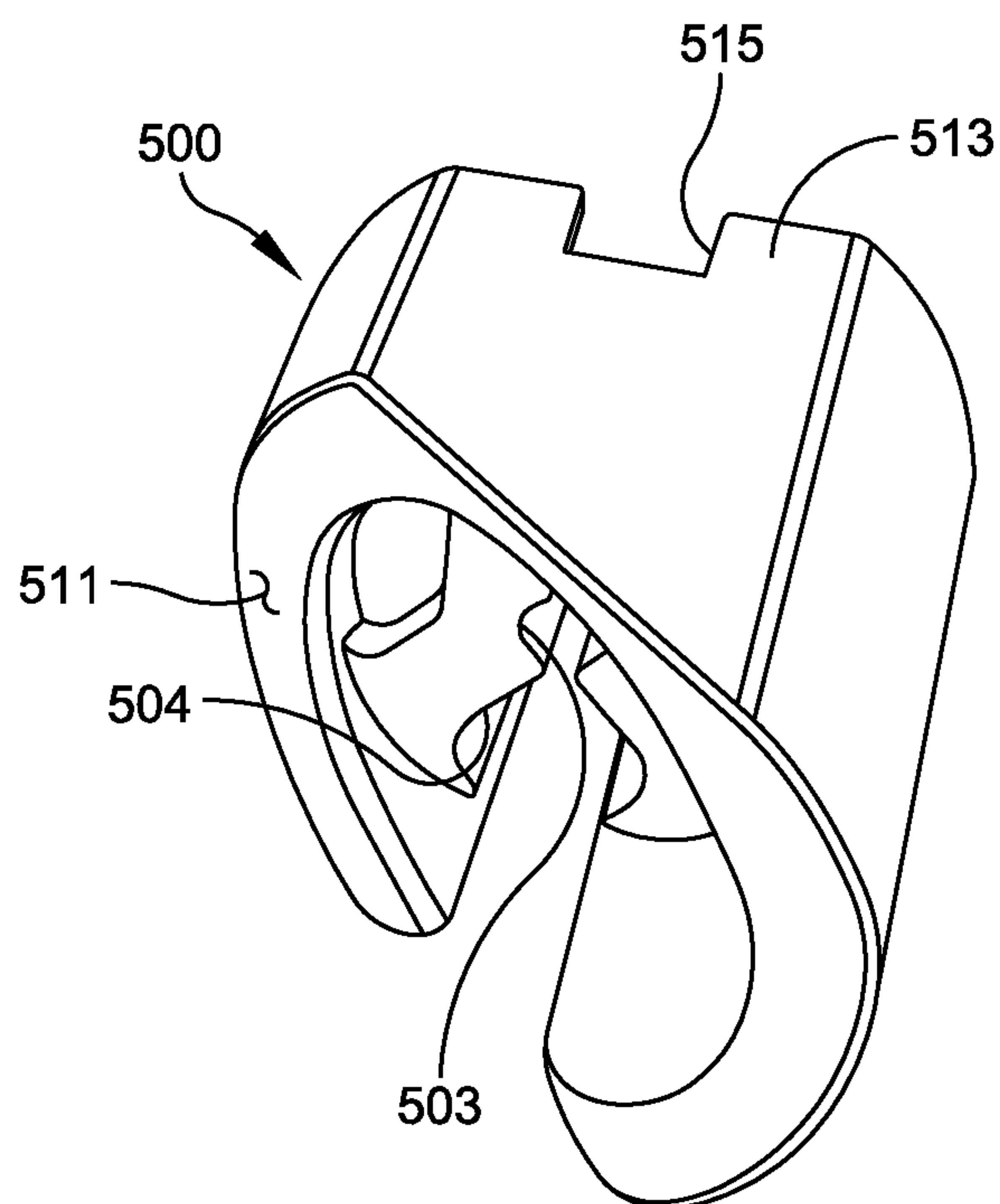


FIG. 36



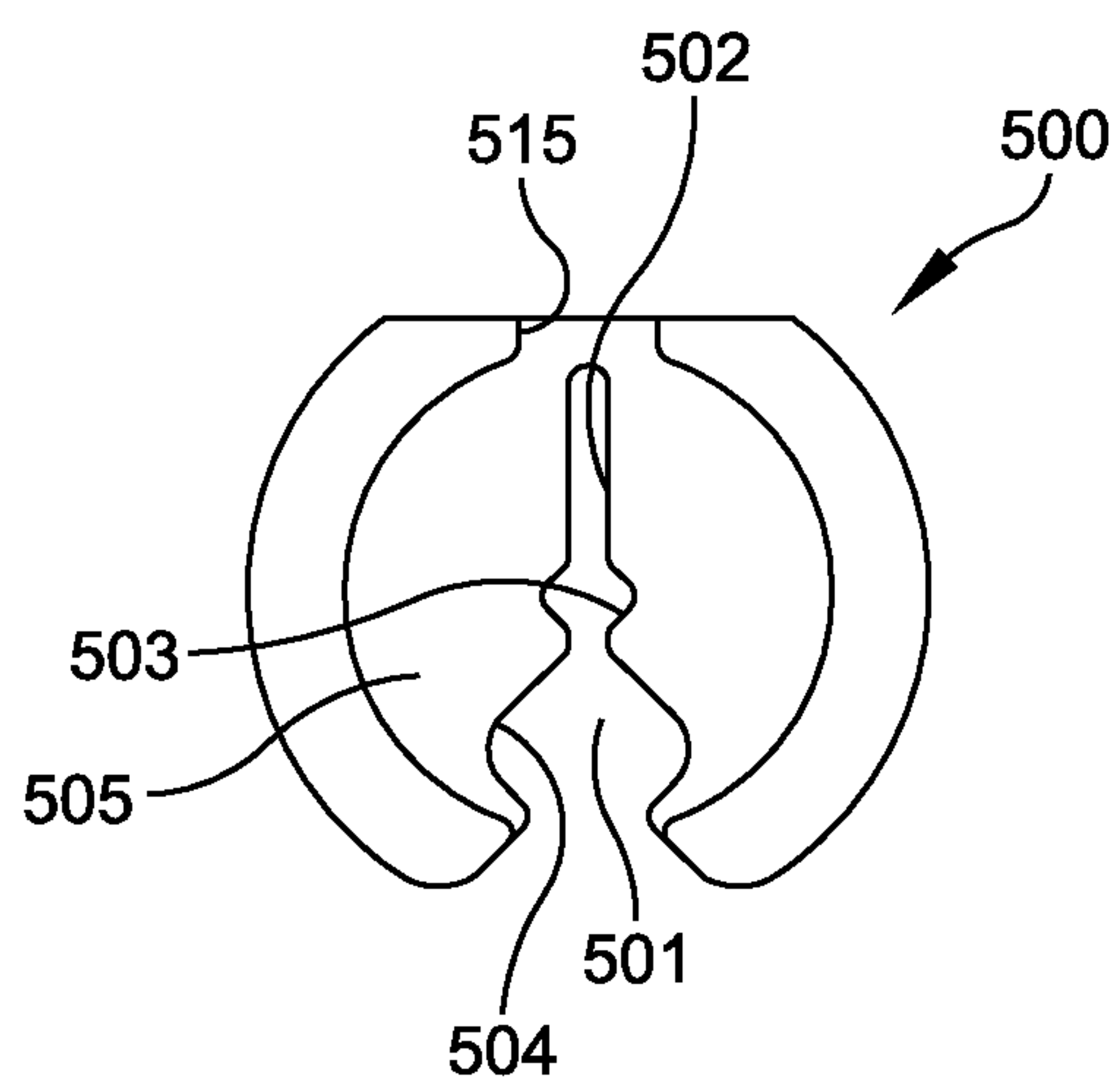


FIG. 37

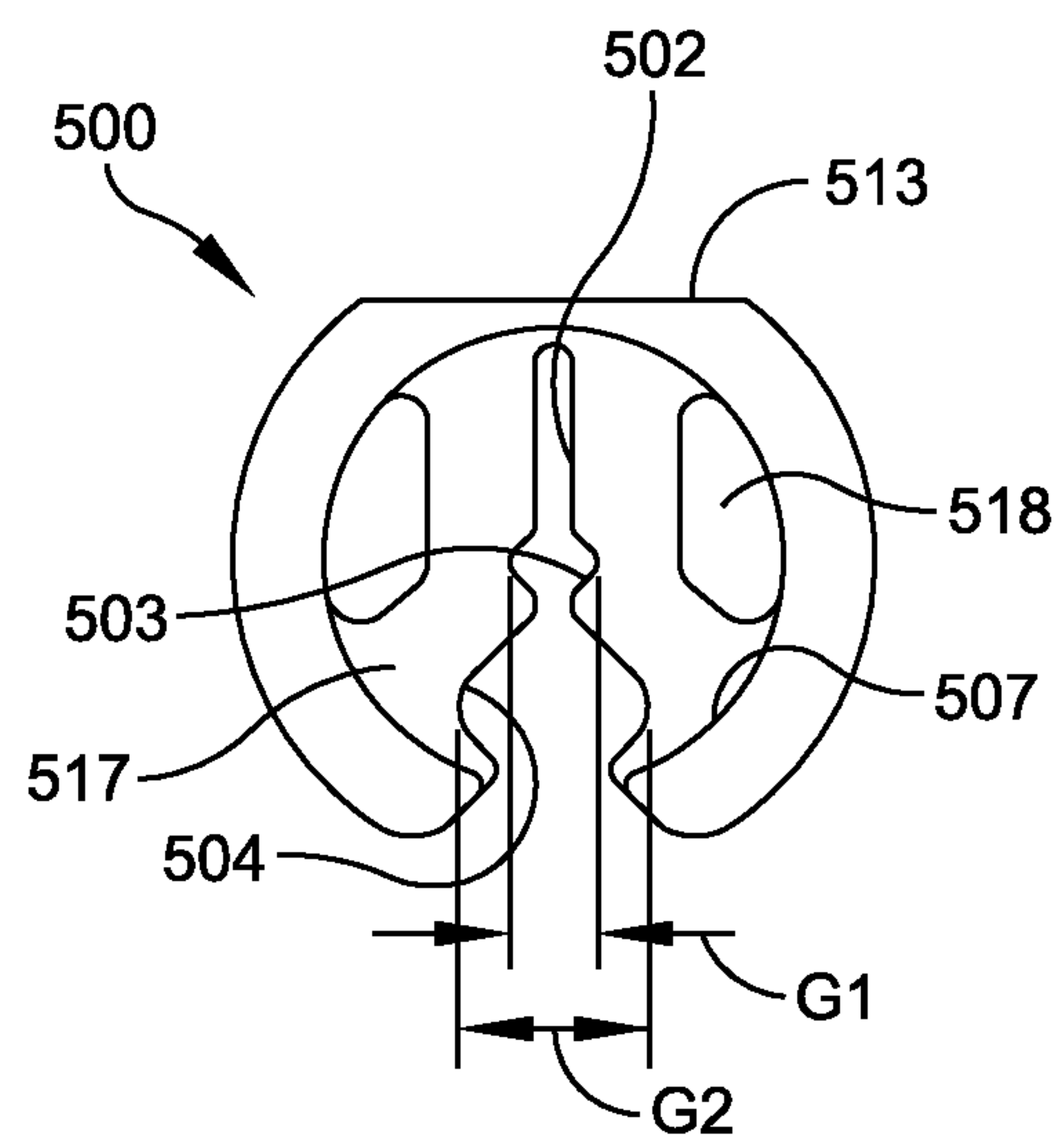


FIG. 38

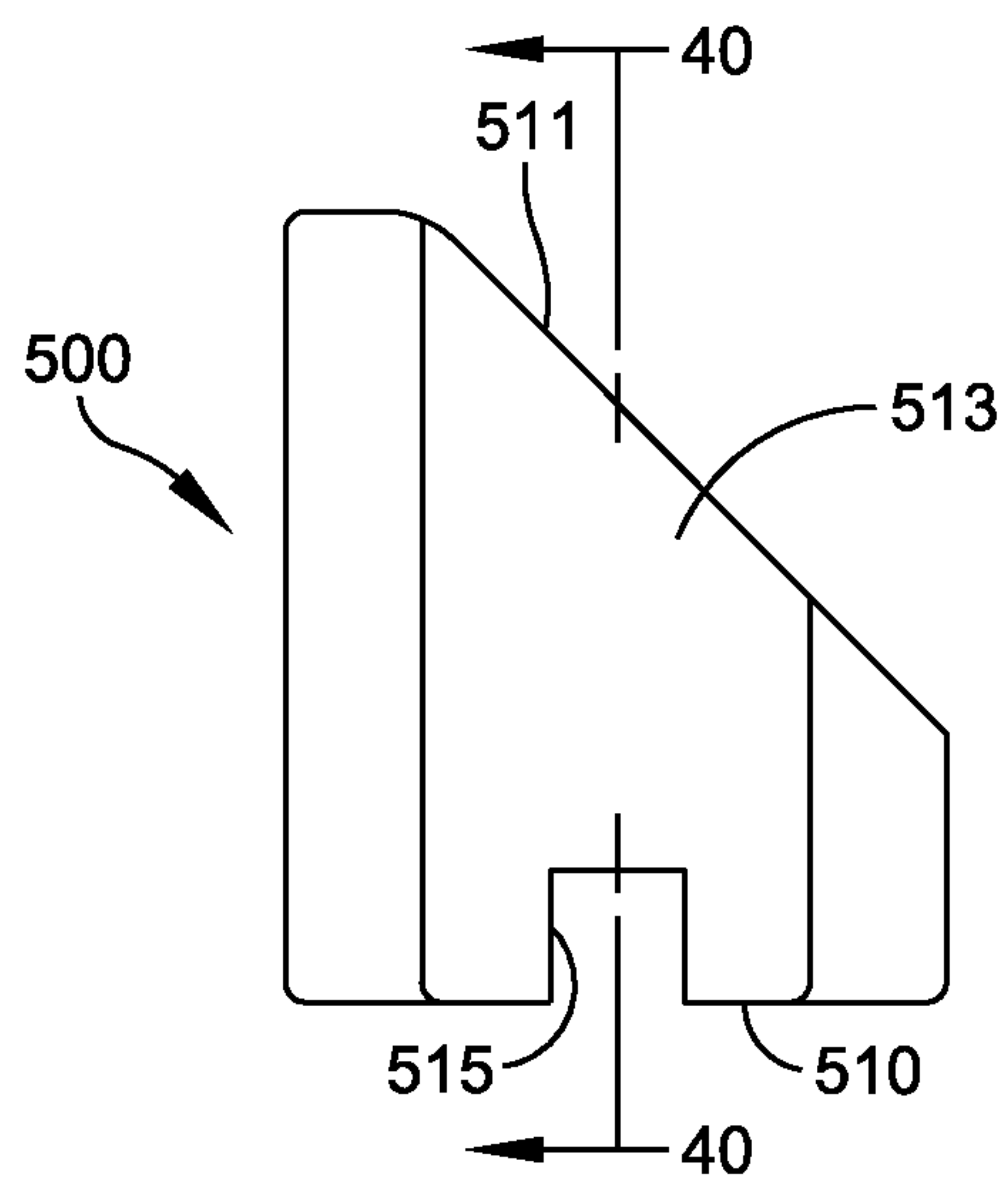


FIG. 39

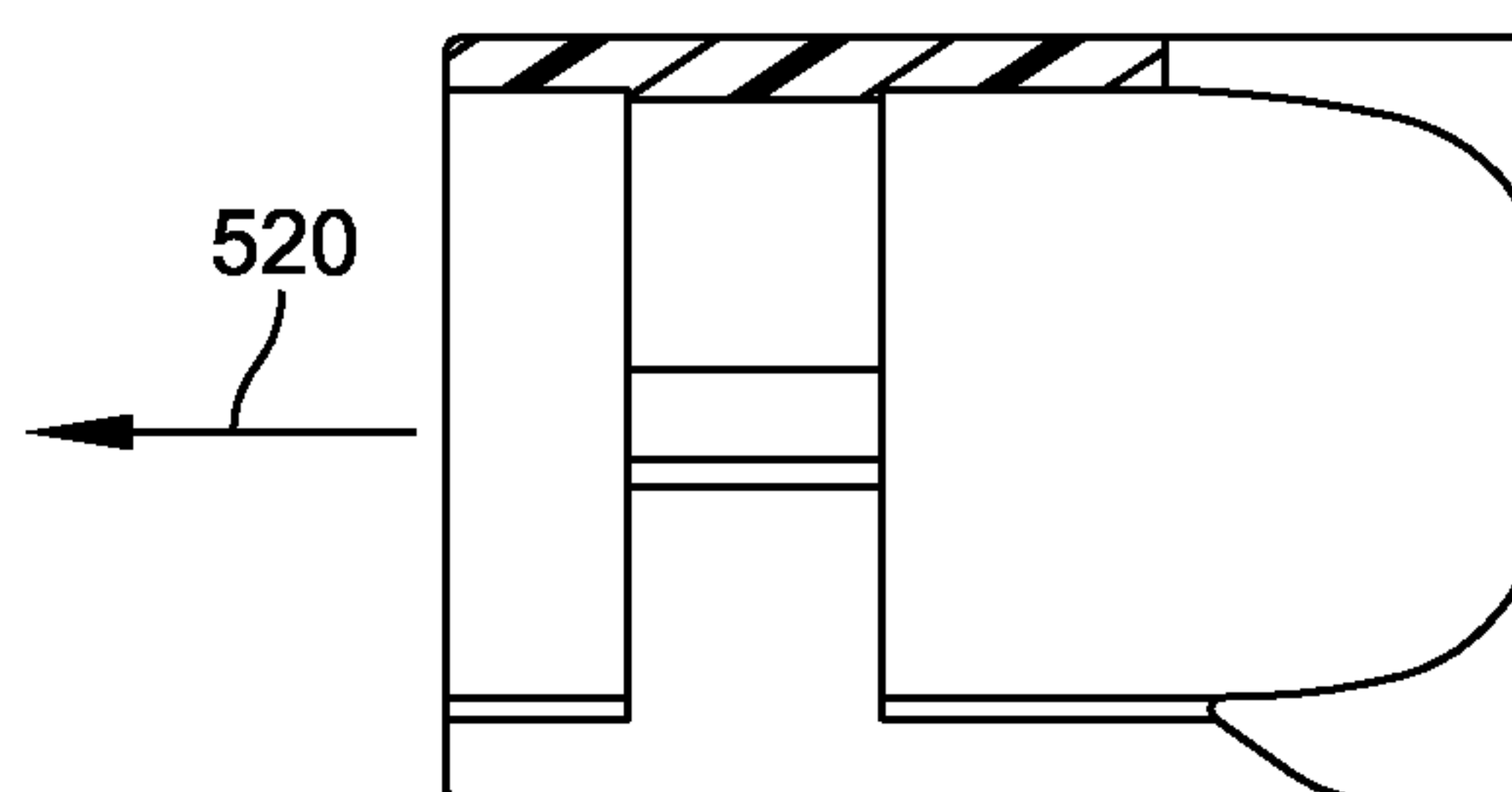


FIG. 40

## 1

**CIRCULAR FIXATOR SYSTEM AND METHOD****CROSS REFERENCE TO RELATED APPLICATIONS**

This application is a continuation of U.S. patent application Ser. No. 17/845,182, filed on Jun. 21, 2022, which is a continuation of U.S. patent application Ser. No. 16/850,387, filed on Apr. 16, 2020, now U.S. Pat. No. 11,389,199, which is a continuation of U.S. patent application Ser. No. 15/782,204, filed on Oct. 12, 2017, now U.S. Pat. No. 10,660,671, which is a continuation of U.S. patent application Ser. No. 14/419,604, filed on Feb. 4, 2015, now U.S. Pat. No. 9,808,288, which is a U.S. national phase entry under 35 U.S.C. § 371 of international patent application No. PCT/US2014/036572, filed May 2, 2014, the entireties of which are incorporated herein by reference.

**FIELD**

This application pertains generally to medical devices, and more particularly to a circular fixator.

**BACKGROUND**

For most standard triple arthrodesis procedures, a prebuilt frame including two tibial rings and a foot plate with an extension can be utilized. A Circular Fixator system can be used for open or closed fracture fixation, pseudoarthrosis or nonunions of long bones, limb lengthening by epiphyseal or metaphyseal distraction, correction of bony or soft tissue deformities, or correction of segmental or nonsegmental bony or soft tissue defects. Circular Fixators have been used on long bones including: the tibia, fibula, femur, humerus, radius and ulna.

Prior to insertion of wires or pins, the circular fixator is positioned around the tibia and foot. The leg is eccentrically located in the frame to accommodate the posterior musculature, and the plantar aspect of the foot extends above or below the foot plate. To maintain the tibia and foot in position, folded up towels can be placed under the calf.

The surgeon inserts wires through the bones, and secures the wires to the frame using bolts that are inserted into holes in the rings and foot plate of the frame.

**SUMMARY**

In some embodiments, a device includes a plurality of rings. Each ring has a first face, a second face, and at least one slot defined by first and second interior edges of the ring on opposing sides of the slot. The at least one slot penetrates from the first face to the second face. The first face of each ring has a first recess or recess pocket adjacent the slot on the first edge and a second recess adjacent the slot on the second edge. A plurality of members, such as posts or bolts, join each one of the plurality of rings to an adjacent one of the plurality of rings.

In some embodiments, a method for positioning a leg of a patient comprises: pre-loading respective fixation devices in a plurality of slots of a circular fixator, each fixation device having a threaded bolt with a side slot in a side edge thereof; positioning the circular fixator around the leg; inserting at least one wire through the leg after the pre-loading; sliding each pre-loaded fixation device until the

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side slot thereof engages the at least one wire; and securing the fixation devices so as to secure the engaged wire to the circular fixator.

In some embodiments, a clip for holding a sponge comprises a body having a longitudinal axis. The body has a tubular sidewall integrally attached to a perimeter of the body. The body has a slot extending parallel to the longitudinal axis, the slot penetrating the tubular sidewall and extending part way through the body. The body has first and second longitudinal tubular gripping surfaces, the second longitudinal tubular gripping surface having an inner diameter that is different from an inner diameter of the first longitudinal tubular gripping surface, the slot extending through each of the first and second longitudinal tubular gripping surfaces. The body has first and second end surfaces, the first end surface perpendicular to the longitudinal axis, the second end surface oriented at an oblique angle relative to the longitudinal axis.

In some embodiments, a fixation device comprises a post having a body with a longitudinal slot penetrating the body, a mounting surface with two curved edges, and an integrally attached threaded member extending from the mounting surface. The body has a side surface with a plurality of grooves therein, the grooves being perpendicular to a length of the longitudinal slot. A washer has a ridge for engaging one of the grooves of the body. A bolt penetrates the washer and the longitudinal slot, the bolt having a head and a side slot in a side surface thereof near the head, for receiving a wire.

In some embodiments, a device comprises a body having a first opening. The first opening includes a passage penetrating completely through the body from a first face of the body to a second face opposite the first face, and a slot extending from the passage to a side edge of the body, the slot having a height that is less than a height of the first opening. A leg positioning element comprises an arm adapted to slidably fit in the first opening for sliding along a first direction normal to the first face; a support adapted to support a first portion of a limb of a patient; and a neck portion connecting the support to an end of the arm. The neck portion is adapted to slidably fit in the passage, to permit removal of the leg positioning element from the body through the passage in a second direction parallel to the first face.

**BRIEF DESCRIPTION OF THE DRAWINGS**

FIG. 1A is an isometric view of a circular fixator according to some embodiments.

FIG. 1B shows a patient's leg positioned in the circular fixator of FIG. 1A.

FIG. 1C shows the patient's leg fixed in the circular fixator of FIG. 1A.

FIG. 2A is a plan view of the circular fixator of FIG. 1A.

FIG. 2B is a posterior side elevation view of the circular fixator of FIG. 1A.

FIG. 3 is a side elevation view of the circular fixator of FIG. 1A.

FIG. 4A is an isometric view of a variation of the circular fixator of FIG. 1A having recess pockets (without scallops).

FIG. 4B is a plan view of the device of FIG. 4A.

FIG. 5 is an isometric view of one of the fixation elements of FIG. 1C.

FIG. 6 is a side elevation view of the fixation element of FIG. 5.

FIG. 7 is an isometric view of an embodiment of the fixation element further including a post.



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FIG. 8 is a front elevation view of the fixation element of FIG. 7.

FIG. 9 is a cross sectional view taken along section line 9-9 of FIG. 8.

FIG. 10 is an enlarged detail of FIG. 9.

FIGS. 11A and 11B are isometric and plan views of a medial-lateral foot support shown in FIG. 1A.

FIGS. 12A and 12B are plan and side views of another embodiment of a medial-lateral foot support suitable for use with the circular fixator of FIG. 1A.

FIG. 13 is an isometric view of a mounting device for the foot support shown in FIG. 11.

FIG. 14 is an isometric view of a medial-lateral leg support shown in FIG. 1A.

FIG. 15 is an isometric view of an anterior leg positioner shown in FIG. 1A.

FIGS. 16A and 16B are left and right side elevation views of the leg positioner shown in FIG. 15.

FIGS. 17-19 are isometric, left side and anterior elevation views of the positioner body shown in FIG. 15.

FIGS. 20 and 21 are isometric and posterior elevation views of one of the support devices shown in FIG. 15.

FIG. 22 is an isometric view of a wire drill guide for inserting the wires shown in FIG. 1C, with the tip extended.

FIGS. 23-25 are front, side and top plan views of the wire drill guide shown in FIG. 22.

FIG. 26 is a cross sectional view taken along section line 26-26 of FIG. 25.

FIG. 27 is an exploded view of a second embodiment of the wire drill guide with combined tip and socket.

FIG. 28 is a side elevation view of the wire drill guide of FIG. 27.

FIG. 29 is an exploded view of a third embodiment of the wire drill guide with combined barrel and socket.

FIG. 30 is a side elevation view of the wire drill guide of FIG. 29.

FIG. 31 is an isometric view of the plug shown in FIG. 1B.

FIG. 32 is a cross sectional view of the plug of FIG. 31.

FIGS. 33 and 34 are isometric and plan views of a wrench used to tighten the fixation elements and pin of FIG. 1C.

FIGS. 35 and 36 are front and rear isometric views of a clip for securing a sponge to one of the wires or rods of FIG. 1C.

FIG. 37 is a front end view of the clip of FIG. 35.

FIG. 38 is a rear end view of the clip shown in FIG. 36.

FIG. 39 is a top plan view of the clip shown in FIG. 35.

FIG. 40 is a cross sectional view taken along section line 40-40 of FIG. 39.

## DETAILED DESCRIPTION

This description of the exemplary embodiments is intended to be read in connection with the accompanying drawings, which are to be considered part of the entire written description. In the description, relative terms such as “lower,” “upper,” “horizontal,” “vertical,” “above,” “below,” “up,” “down,” “top” and “bottom” as well as derivative thereof (e.g., “horizontally,” “downwardly,” “upwardly,” etc.) should be construed to refer to the orientation as then described or as shown in the drawing under discussion. These relative terms are for convenience of description and do not require that the apparatus be constructed or operated in a particular orientation. Terms concerning attachments, coupling and the like, such as “connected” and “interconnected,” refer to a relationship wherein structures are secured or attached to one another either

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directly or indirectly through intervening structures, as well as both movable or rigid attachments or relationships, unless expressly described otherwise.

The present disclosure provides circular fixators comprising rings with a plurality of slots for attachments of fixation devices. The fixation devices fix the wires that inserted into the patient's leg and/or foot, for example. The circular fixator can be used for other extremities with different variations of the structures as described herein. In some embodiments, the fixation devices include bolts with side slots, for receiving the wires. The fixation devices can be pre-assembled and pre-loaded onto the circular fixator (e.g., by a scrub technician) prior to the arrival of the surgeon in the operating room. After inserting the wire, the surgeon can quickly and easily slide the pre-loaded fixation device into position for capturing the wire in a side slot of the fixation device. In some embodiments, the rings have recesses. The recesses can include receptacles such as scallop-shaped recesses, curved recesses, V-shaped recesses, rectangular, semi-hexagonal, semi-octagonal, or recess pockets on both sides of the slots, and recesses adapted to receive the fixation devices, and prevent them from slipping in the tangential direction when the surgeon applies tension to the wires for compression or distraction of joints or fractures. In some embodiments, the fixation devices include washers adapted to fit in respective recesses. The fixation device is configured to fit in the receptacle. In some embodiments, at least one edge of the fixation device can be received by the receptacle, even though the shape of the fixation device is different from the shape of the receptacle. For example, a rectangular receptacle can receive a hexagonal fixation device, and two sides of the receptacle will engage two opposite sides of the hexagonal fixation device to prevent slippage.

In some embodiments, one or more of the fixation devices include posts for providing an offset between the plane of the ring and the fixation bolt. In some embodiments, the posts have horizontal grooves and the washer has a ridge for engaging one of the grooves of the post, to prevent the bolt from slipping on the post. In some embodiments, the posts are adapted to fit in the recesses.

In some embodiments, leg positioners are provided for supporting the leg and foot in a neutral position or other desired position during the procedure. In some embodiments, the leg positioners can be positioned and affixed to the circular fixator quickly and easily without using any tools, and the leg positioners have support elements, which can be quickly and easily adjusted without using tools for positioning the leg.

FIG. 1A is an isometric view of a circular fixator 100 according to some embodiments of this disclosure. FIG. 1B shows the circular fixator 100 of FIG. 1A with a patient's foot drawn in phantom to show an exemplary use of the circular fixator for positioning the leg prior to and during the fixation procedure. FIG. 1C shows the circular fixator 100 with the patient's foot fixed by wires 412, following the procedures. FIGS. 2A, 2B and 3 show plan, rear elevation and side elevation views of the circular fixator 100.

The circular fixator 100 is a device comprising a plurality of rings 102, 130 and 142. In some embodiments, one ring 102 of the plurality of rings is elongated. The elongated ring 102 has a proximal portion 102a and a distal portion 102b. The elongated ring 102 is configured so that the distal portion 102b can be rigidly attached to the first portion 102a in a first position parallel to or coplanar with the proximal portion 102a. As shown in phantom in FIG. 3 the distal portion 102b can be rigidly attached to the first portion 102a



in a second position having a non-zero angle with respect to the proximal portion. In some embodiments, the non-zero angle is 90 degrees.

In some embodiments, the plurality of rings include first and second circular rings **142**, **130** adapted to be positioned around a leg of a patient during fixation, and the first ring **142** is greater in diameter than the second ring **130** and **102**. This configuration permits the surgeon to maintain a constant distance. As a general rule of thumb, the clearance between the inner diameter of each ring and the nearest leg tissue is about two fingers' breadth (e.g., about 3.7 cm to about 4 cm), at different heights along the patient's leg. Similarly, if the fixator is adapted for use on another extremity, a similar clearance between the inner diameter of each ring and the nearest tissue is used. Because the patient's calf is greater in diameter further from the ankle, the top ring **142** is correspondingly greater in inner diameter than the middle ring **130**. Because the ring **130** is smaller, it reduces the moment arm for pins or wires. For example in one embodiment, the top ring **142** has an inner diameter of about 18 cm, and the middle ring **130** has an inner diameter of about 16 cm. This is just one example, and any combination of ring sizes can be used to accommodate the geometry of any given patient's calf.

Each ring **102**, **130** and **142** has a first (e.g., top) face, a second (e.g., bottom) face, and at least one slot. For example, ring **102** has slots **104**, **110**, **116**, **122**; ring **130** has four slots, including slots **132**, **138**; and ring **142** has slots **144**, **150**, **154**, and **160**. Each slot is defined by first and second interior edges of its respective ring **102**, **130** and **142** on opposing sides of the slot. Each slot (e.g., **104**) penetrates from the first face of the ring (e.g., **102**) to the second face. The first (e.g., top) face of each ring (e.g., **102**) has a first scallop-shaped recess (e.g., **106a**) adjacent the slot **104** on the first edge and a second scallop-shaped recess (e.g., **106b**) adjacent the slot **104** on the second edge. The slot **104** terminates at an opening **108a**, **108b** at each respective end of the slot. The openings **108a**, **108b** have a dimension that is substantially greater than a width of the slot **106**. Similarly, in the example of FIG. 1, slot **110** has scallop-shaped recesses **112a**, **112b** and end openings **114a**, **114b**; slot **116** has recesses **118a**, **118b** and end openings **120a**, **120b**; slot **122** has recesses **124a**, **124b** and end openings **126a**, **126b**; slot **132** has recesses **134a**, **134b** and end openings **136a**, **136b**; slot **138** has recesses **140a**, **140b** and end openings **141a**, **141b**; slot **144** has recesses **146a**, **146b** and end openings **148a**, **148b**; slot **150** has recesses **151a**, **151b** and end openings **152a**, **152b**; and slot **160** has recesses **162a**, **162b** and end openings **164a**, **164b**.

In other embodiments, instead of a scallop-shaped recesses **134a**, **134b**, **146a**, **146b**, one or more of the rings include recess pockets, as described below with reference to FIGS. 4A and 4B. In some embodiments the circular fixator includes at least one ring **102** having scallop shaped recesses **106a**, **106b**, **112a**, **112b**, **118a**, **118b**, and at least one ring having recess pockets, as described below in the discussion of FIG. 4A.

FIGS. 4A and 4B show a variation of the circular fixator **700**. In some embodiments, the circular fixator **700** includes the same bottom ring **102** as described above, with scalloped recesses on each side of each slot. The scallops provide additional protection against slippage of the fixation device, for example when tensioning a wire to compress or distract a joint. In some embodiments, the middle ring **702** has slots **712** with recesses **714a**, **714b** (without scallops) on each side of the slots **712**. Similarly, the top ring **704** has slots **716** with recesses **718a**, **718b** (without scallops) on each side of the

slots **712**. In many procedures, the surgeon does not require compression or distraction of the foot or leg at the levels of the middle ring **702** or the top ring **704**. These rings **702**, **704** stabilize the leg. The rings **130**, **142** with scallops can be used at the upper levels of the leg as described above with reference to FIGS. 1-3.

However, if the upper and middle ring are only used for stabilization, the rings **702**, **704** without the scallops may permit the fixation device **300** to move toward the wire more quickly without any chance of becoming caught in a scallop. Additionally, the recesses **714a**, **714b**, **718a**, **718b** without scallops allow the surgeon to fix the fixation device **300** anywhere along the length of the slots, and the surgeon is not limited to any discrete set of fixed locations.

When the wire is run perpendicular to the slots **712**, **716**, there is little chance that the fixation device **300** can slip in the slot. If the wires are to be run perpendicular or nearly perpendicular to the slots, the surgeon may prefer that the rings **702**, **704** (without scallops) are used for ease of use. On the other hand, the greater the angle between the wires and the slots, the greater the benefit of the scallops, for preventing slippage.

In other embodiments (not shown), all three rings **102**, **702**, **704** can be provided without scallops.

The reference numerals of other features of the circular fixator of FIGS. 4A and 4B which are the same as the corresponding items shown in FIG. 1A are omitted for ease of understanding, and their descriptions are not repeated.

The device further includes a plurality of posts **270** joining each one of the plurality of rings **130**, **142** to an adjacent one of the plurality of rings. In some embodiments, the center ring **130** is connected to the top ring **142** by fixed posts **270**, and the center ring **130** is connected to the bottom ring **102** by a plurality of calibrated struts **260**. The calibrated struts permit accurate and even adjustments to the distance between the bottom ring **102** and the center ring **130** (e.g., for compression/distraction of the foot or height adjustments to the desired height). In some embodiments, all of the posts **270** are of the same fixed type (as shown in FIG. 4A). In some embodiments, as shown in FIG. 1A, one or more of the posts **270** can be replaced by suitably configured plates **271**, threaded rods, spacers, or struts. For example, the plates **271** can each have a respective vertical slot **272**. Each slot **272** has openings **273** at the top and bottom of the slot. The slots **272** can have the same width as the slots **112a**, **112b**, and the openings **273** can have the same size as the openings **114a**, **114b**. The slots **272** of the plates **271** can receive fixation elements **330**, and the openings **273** can receive plugs **170**, for pre-loading the fixation elements **330**, in the manner described below. In other embodiments, any combination of posts **270**, plates **271**, rods, spacers and/or struts can be used.

In some embodiments, each scallop-shaped recess (e.g., **112a**, **112b**) comprises a plurality of curved arcs, and each curved arc subtends an angle in a range from about 10 degrees to 170 degrees. In some embodiments, the subtended angle is in a range from 30 degrees to 150 degrees. In some embodiments, the subtended angle is in a range from 30 degrees to 150 degrees. In some embodiments, the subtended angle is in a range from 60 degrees to about 120 degrees. In some embodiments, each scallop-shaped recess comprises a plurality of circular arcs, each circular arc subtending an angle of about 90 degrees. The arcs subtend an angle that is sufficiently large to resist slipping of any fixation device **330** (FIG. 5, described below) relative to the slot, particularly if any force component is applied to the fixation device **330** parallel to the direction of the slot (e.g.,



110). In some embodiments, the rings **102**, **130**, **142** comprise a metal, such as aluminum or titanium.

In some embodiments, at least one of the fixation devices **300** comprises a bolt **330**, a nut **334** and a washer **340**. The bolt **330** has head **332** and a threaded portion **331** sized to fit through the slot (e.g., **112a**, **112b**). The bolt **330** includes a side slot **348** in a side surface of the threaded portion **331**, for receiving a wire (FIG. 1C) The washer **340** is shaped to fit a respective one of the curved arcs on the scallop-shaped recess **114a**, **114b** on each side of the slot **110** of the ring **102**. In some embodiments, the washer **340** has a textured gripping surface **346** for securely positioning the wire. The washer **340** has two curved edges **343** adapted for fitting the curved arcs of the scallop shaped recesses. The remaining two edges of the washer can be flat. The gripping surface can have ridges, barbs, splines, slots, a knurled surface, or the like. In some embodiments, the opening (e.g., **114a**, **114b**) at each end of each slot (e.g., **112a**, **112b**) is adapted to receive a nut **334** of a fixation device **330** through the opening. In some embodiments, the slot (e.g., **112a**, **112b**) is adapted to receive a threaded portion **331** of the fixation device **330** through the slot, but the slot has a width that is smaller than a dimension of the nut **334**. Thus, once the nut **334** is affixed to the threaded portion **331**, the fixation device **330** can be inserted into the openings (e.g., **114a**, **114b**) but cannot fall out of the slots. The fixation devices can be pre-assembled, and the pre-assembled fixation devices can pre-loaded onto the slots prior to surgery. The openings (e.g., **114a**, **114b**) can be then be plugged to prevent release of the fixation devices **330**.

Some embodiments further comprise at least one post **302** (FIG. 7) having a threaded body portion **314** adapted to fit through the slot (e.g., **110**) of the ring **102**. The post **302** has a longitudinal slot through the post (and parallel to the longitudinal axis of the post) for receiving the bolt **330** of the fixation device **300**. The post **302** has a mounting surface **303** for engaging a respective one of the curved arcs on the scallop-shaped recess (e.g., **112a**) on each side of the slot (**110**). In some embodiments, the mounting surface **303** of the post **302** has two curved (e.g., circular) arc edges **310**, adapted to be received in one of the curved arcs on the scallop-shaped recess. In some embodiments, the mounting surface **303** of the post **302** has two flat edges **312**, which can be gripped in the jaws of a wrench or other suitable tool. The post **302** allows the surgeon to position the bolt **330** of a fixation device **300** at a height that is offset from the rings **102**, **130**, **142**.

As shown in FIG. 7, the post **302** has a plurality of grooves **306** on at least one side face of the post, oriented perpendicular to the length (longitudinal axis) of the post. In some embodiments the opposite side surface **304** of the post **302** is flat, as shown in FIG. 8. In other embodiments, both side faces of the post have grooves **306**. The washer **340** includes a ridge **342** adapted to engage one of the grooves **306**. This prevents the bolt **330** from slipping relative to the post **302**, particular when a component of the force applied to the bolt **330** is parallel to the direction of the slot **307** of the post **302**. In some embodiments, the washer **340** is of the same type described above, and the ridge **342** is included on the face of the washer opposite the textured gripping surface **346**.

In some embodiments, the surgeon can also insert rods **350** into the bone using the circulator fixator **100**. A pin cube **351** (FIG. 1C) can be mounted in the slot (e.g., **154**, FIG. 1C) for fixing the pin **350** (also referred to as a rod).

In some embodiments, the surgeon tightens the bolts **330** using a ratcheting wrench **600** (FIGS. 33 and 34) having an

open socket that can slide over a threaded rod to tighten or loosen a bolt or nut. The wrench has a ratchet mechanism. In some embodiments, the ratchet mechanism includes a switch pin biased against a gear **610** by a spring to act as a pawl, to allow rotation in one direction. The wrench body **601** has an open end **605**, and the rotating socket **602** has an open end **603**. To place the wrench in position on the rod, the open end **603** of the socket is aligned with the open end **605** of the wrench body, as shown in FIGS. 33 and 34. This wrench configuration is particularly useful for tightening or loosening threaded rod, bolts and nuts.

In other embodiments (not shown), the switch pin is omitted. The direction of rotation of the wrench is fixed for applying torque only when rotated in one direction. A spring-biased piston with a beveled piston surface acts as a pawl that engages the gear **610** of the hexagonal socket **602** to allow one-way rotation of the hexagonal socket. The wrench **600** is oriented with one side facing upwards to apply torque for tightening bolts **330**, and with the other side facing upwards to apply torque for loosening the bolts. In some embodiments, indicia are placed on the wrench, so the user can quickly determine which side of the wrench should face upwards for any given tightening or loosening step.

In some embodiments, as shown in FIGS. 31 and 32, the device further comprises a plurality of detachable plugs **170**. Each plug **170** has a shape and size adapted to be detachably retained in a respective one of the openings (e.g., **114a**), for retaining the bolt **330** in the slot **110** prior to tightening the nut **334** and bolt **330**. Each plug **170** has a compressible tubular end **176** and a ridge **180** for retaining the plug within a respective one of the openings **114a**. The scrub technician can quickly and easily insert one of these plugs in each opening **114a**, **114b** of a slot **110** for retaining pre-assembled, pre-loaded fixation devices **330**, posts **300**, or pin cubes on the circular fixator.

In some embodiments, the plug **170** includes a gripping portion **172**, which may include a gripping surface **174**, such as a contoured portion. The plug **170** further includes a plug portion **176**, which is shaped to fit the openings (e.g., **114a**, **114b**) at the end of each slot. For a circular opening (e.g., **114a**), the plug portion **176** is generally shaped as a circular cylinder. The plug portion **176** further includes a plurality of slots **178** oriented in the longitudinal direction. For example, the plug portion **176** may have four slots evenly spaced about the circumference of the plug portion **176**. The plug portion **176** further includes a ridge **180** for retaining the plug **170** in the opening **114a**. The ridge is greater in diameter than the opening **114a**. The slots **178** permit the members of the plug portion **176** to be squeezed together for insertion into, or removal from, the openings. The plug is made of a plastic materials such as acrylonitrile-butadiene-styrene (ABS).

In some embodiments, a plurality of leg positioners hold the patient's leg in a neutral position while the surgeon inserts wires and/or rods in the leg. The leg positioners generally include at least one Y-shaped member (or round or curved member) having a concave or angled portion for supporting a limb of a patient, and a mounting device for attaching the positioner to one of the plurality of rings without a tool.

FIGS. 1 and 11A-11B show an example of a medial-lateral leg positioner **230**, in which the Y-shaped member **230** includes a support arm **231** having a slot **235** through the arm. An angled support member **233** is attached to the arm **231**. The leg positioner **230** can be attached to or detached from the ring **102** without using any tool.



FIGS. 12A and 12B show another example of a medial-lateral leg positioner **261**, having a support arm **262** and a support member **263**. The support member **263** is asymmetrical, and includes an extended cup-shaped member **265** configured to extend under and support the foot. The extended member **265** can be curved or angled. In some embodiments, the extended member **265** ends in a substantially flat portion **267**. The other portion **264** of the support member **263** can be flat or curved, and can be similar to the member **233** in FIG. 11A. The support arm **262** has a slot **2266** through the arm. The leg positioner **230** can be attached to or detached from the ring **102** without using any tool.

In some embodiments, the leg positioner **230** is attached to the ring **102** by a mounting device **257** (FIG. 13) comprising a threaded member **256** adapted to fit through the slot (e.g., **110**) of one of the plurality of rings **102** and through the slot **235** of the support arm **231** simultaneously, for attaching the arm **231** to the ring **102**. The threaded member **256** has a head **254** at one end. The head **254** has a width **W1** smaller than a width of the slots **110** of the rings, and a length **L1** greater than the width of the slots **110** of the ring **102**. The length is selected so that the head can engage one of the curved arcs of the scallop-shaped recesses **112a**, **112b** on each side of a slot **110** of one of the plurality of rings **102**.

In some embodiments, the mounting device **257** further includes a threaded knob **252** configured so that it can optionally be received in one of the curved arcs of the scallop-shaped recess **112a** of the one of the plurality of rings **102** (although the knob **252** can be located in other positions). The threaded knob **252** is configured for receiving the threaded member **256** of the mounting device **257**. The threaded knob **252** has a size that is greater than a width of the slots **110** of the rings, but smaller than the dimension of the openings **114a**, **114b**. Thus, the mounting device can be pre-assembled to the Y-shaped member **230**, and the knob can then be passed through the opening **114a**, **114b** to install the leg positioner **230** on the ring **102**. Alternatively, the pre-assembled mounting device **257** can be installed on the ring by orienting the head **254** parallel to the slot **110**, and passing the head **254** through the slot **110**.

FIG. 14 shows another leg positioner **250** suitable for attachment to the top ring **142**, in which the Y-shaped member **250** includes a support arm **251** having a slot **255** through the arm. An angled support member **253** is attached to the arm **251**. The leg positioner **250** can be attached to the ring **142** using the same type of mounting device **257** described above (and shown in FIG. 13), and for brevity, a description of the mounting device is not repeated. The threaded member **256** of mounting device **257** is adapted to fit through the slot (e.g., **110**) of one of the plurality of rings **102** and through the slot **255** of the support arm **251** simultaneously, for attaching the arm **251** to the ring **130** or **142**.

These are just two examples of the leg positioner. In other embodiments, the support member **233** and/or **253** can have a different angle. In other embodiments, the support member **233** and/or **253** can have a concave curved shape.

FIGS. 15-21 show another type of leg positioner **200** suitable for supporting two different portions of the leg at two different heights simultaneously. FIGS. 15, 16A and 16B are isometric, right side, and left side elevation views, respectively, of the leg positioner assembly **200**. FIGS. 17-19 are isometric, side elevation and front elevation views

of the body **201** of the assembly **200**. FIGS. 20 and 21 are isometric and rear elevation views of the top leg positioner **212** of FIG. 15.

Leg positioner **200** includes a plurality of independently positionable support devices **204**, **206** for supporting a limb of a patient. Support device **204** has a respective arm **207** and a respective concave or angled portion **208** attached to the arm **207**, for supporting the heel. Support device **206** has a respective arm **207** and a respective concave or angled portion **212** attached to the arm **207**, for supporting the calf. The positions of the support devices **204**, **206** can be switched by the surgeon or technician, if desired.

Leg positioner **200** includes a body **201** having a plurality of openings **203** for slidably receiving respective ones of the plurality of support devices **204**, **206** through the openings **203**. In some embodiments, the support devices **204**, **206** are of the same type as each other. In some embodiments, the support devices **204**, **206** are of different types from each other (i.e., include different concave or angled portions). In other embodiments, the support devices **204**, **206** are of different sizes and/or different types.

In some embodiments, the concave or angled portion **212** of at least one of the support devices **206** has a plurality of slots **214a**, **214b** for receiving a retaining strap (not shown) therethrough. For example, the technician or surgeon can optionally run a Velcro strap through the slots **214a**, **214b** and wrap the strap around the patient's leg.

The leg positioner **200** also includes a respective retaining device **209**, **215** proximate each respective openings **203**, for retaining a respective one of the support devices **204**, **206** in a continuously selectable position.

The leg positioner **200** further includes a mounting device **218** for detachably mounting the leg positioner to an edge of one of the plurality of rings. For example, as shown in FIG. 1A, the leg positioner **200** can be attached to the bottom ring **102**.

As best seen in FIGS. 17-19, the body **201** has a first opening **203**. The first opening **203** includes a passage **203p** (FIG. 19) penetrating completely through the body **201** from a first face **201a** of the body **201** to a second face **201b** opposite the first face, and a relatively narrow slot **205** extending from the passage **203p** to a side edge **201e** of the body. The slot **205** has a height **H2** that is less than a height **H1** of the first opening **203**.

As shown in FIGS. 15, 16A, 20 and 21, each support device (also referred to as a leg positioning element) **204** (**206**) comprises an arm **207** adapted to slidably fit in the first opening **203** for sliding along a first direction **X** normal to the first face **201a**. A support **208** (**212**) is adapted to support a first portion of a limb of a patient. A neck portion **207n** connects the support **208** (**212**) to an end of the arm **207**. The neck portion **207n** is adapted to slidably fit in the slot **205**, to permit removal of the leg positioning element **204** (**206**) from the body **201** through the slot **205** in a second direction **Y** parallel to the first face **201a**. When the support device **204**, **206** is advanced in the **X** direction, so the retaining members **221** engage the arm **207**, the support device **204**, **206** is constrained from moving in the **Y** direction.

Referring now to FIG. 16B, the body **201** has a first and second retaining members **221** defining the slot **205** therebetween. The retaining members **221** have a depth **221d** in the first direction (**X**) that is less than a depth **201d** of the body **201** in the first direction. The length of the neck portion **207n** is greater than the depth **221d** of the retaining members **221**, and is sufficiently long so that the end of the arm **207** can be backed out (in the **-X** direction) until the neck **207n** is aligned between the retaining members **221**, and can be



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moved in the Y direction through the retaining members 221. In some embodiments, the neck portion 207<sub>n</sub> has a length LN (FIG. 20) that is less than the depth 201<sub>d</sub> of the body 201 in the first direction X. FIG. 16B shows the positioner 200 with both support devices 204, 206 in the fully retracted position (wherein the concave or angled portions 208, 212 abut the first face 201<sub>a</sub> of the body 201. In this position, the neck portions 207<sub>n</sub> are positioned between the retaining members 221, to permit the support devices 204, 206 to be removed from the body by sliding the support devices in the Y direction, through the slot 205 between the retaining members 221. Conversely, when the arms 207 are extended so the concave or angled portions 208, 212 do not abut the first face 201<sub>a</sub> of the body 201, the arms 207 can slide in the X direction, but cannot move in the Y direction.

In some embodiments, when the surgeon completes insertion of wires and/or pins, the leg positioner assembly 200 can be removed easily by fully retracting each of the support devices 204, 206, and sliding the support devices in the Y direction relative to the body 201 of the leg positioner assembly 200 (or sliding the body 201 relative to the support devices 204, 206). Thus, the leg positioner assembly 200 can be removed without disturbing the position of the leg relative to the frame 100.

The leg positioner 200 further includes a first locking device 209 (215) for locking the arm 207 in a fixed position relative to the body 201 without using a tool. For example, as shown in FIG. 15, the locking device 209 (215) can be a screw including an enlarged head for gripping and advancing the screw without a tool.

Some embodiments further comprise a mounting device 218 for mounting the body to the circular fixator 100 without using a tool. For example, body 201 has two jaws 216, 217 spaced sufficiently far apart to receive an edge of one of the rings 102, and a screw 218 which penetrates the bottom jaw 216.

FIGS. 23-26 show a wire drill guide 400 for inserting wires 412 to fix the patient's leg to the frame 100. The drill guide 400 is adapted for use with both smooth wire (not shown) and olive wire 412 (having an olive structure 413). FIG. 22 is an isometric view, and FIG. 24 is a side elevation view. FIG. 23 is a front elevation view of the wire insertion tip 406 shown in FIGS. 22 and 24. FIG. 25 is a top plan view, and FIG. 26 is a cross-sectional view taken along section line 26-26 of FIG. 25. FIG. 26 includes the ring 102 of circular fixator 100 and a wire 412 having an olive structure 413 for reference. The ring 102, wire 412 and olive structure 413 are not part of the drill guide 400 but are included in FIG. 26 for ease of understanding the use of the wire drill guide 400.

The drill guide 400 includes a barrel 401, through which the wire 412 can be run. The barrel 401 is generally in the form of a hollow, half-cylindrical shell, with flat edges 401<sub>b</sub> on the bottom thereof. A handle 402 is provided at the rear end of the drill guide 400. The front end of the barrel 401 has a rearward extending finger 404. With the flat edges 401<sub>b</sub> of the barrel resting on the top or bottom surface of one of the rings 102, 130, 142, the rearward extending finger 404 wraps around under the inner edge of the ring (e.g., 102), to provide stability while the surgeon inserts the wire 412. For example, in FIG. 26, a cross-section of the ring 102 is shown in phantom. By positioning the drill guide 400 relative to the inner edge of the ring 102 as shown, the drill guide 400 is stably directed radially inward toward the patient's leg.

As shown in FIG. 26, the barrel 401 has a proximal guide portion 410 with an inlet opening 409 therein at the rear of

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the barrel. The opening 409 of the proximal guide portion 410 is larger in diameter than the olive structure 413. The passage 410 and inlet 409 are larger than the olive 413 of a standard olive wire 412, permitting the olive to be inserted through the inlet 409. The barrel 401 also includes an outlet passage 411 which is larger in diameter than the olive 413.

The drill guide 400 further comprises a tip 405 having a central longitudinal passage 407. The passage 407 is greater in diameter than the wire 412 (e.g., K-wire), but smaller in diameter than the olive 413. (Although an example is described herein using olive wire, the same drill guide 400 can also be used with smooth wire.) The tip 405 has a slot 406 extending in the radial direction from the passage 407 all the way to the exterior surface of the tip, as best seen in FIGS. 22 and 24. Thus, if an olive wire 412 is inserted through the barrel 401 and the outlet passage 411, and advanced until the olive 413 is within or near the tip 405, the tip 405 of the drill guide 400 can be removed by passing the slot 406 of the tip over the front portion 412<sub>f</sub> of the wire 412. The remaining portions of the drill guide 400 can then be backed off over the olive 413, and the rear portion of the wire 412 (distal from the patient) is fixed to the frame 100 by the fixation element 330. The drill guide can be made of 630 stainless steel, for example.

The method of using the drill guide 400 for inserting at least one wire 412 includes placing a drill guide 400 on a ring 102 of the circular fixator 100, so as to direct the at least one wire 412 towards a bone of the patient, where the drill guide 400 has a longitudinal opening 407 adapted to pass the at least one wire 412 therethrough (but not large enough to pass the olive 413 therethrough). The surgeon or technician holds the handle 402 to position the drill guide 400. The surgeon drives the at least one wire 412 through the longitudinal opening 407 and through the bone.

In some embodiments, the drill guide 400 has a flat surface 401<sub>b</sub> and a finger 404 for wrapping around a proximal edge of the ring 102, and the step of placing the drill guide 400 includes positioning the drill guide so that the flat surface 401<sub>b</sub> engages a top or bottom face of the ring 102. The barrel is sized to be long enough (or angled) to permit the surgeon to slide the drill guide 400 forward until the tip 405 contacts the bone for precise drilling.

In other embodiments of the method, the surgeon can position the drill guide 400 under the ring 102, so that the flat surface engages a bottom face of the ring, and the finger 404 wraps around the top surface of the ring.

In some embodiments, the drill guide 400 has a proximal guide portion 410 with an opening 409 therein, the opening of the proximal guide portion larger in diameter than the olive structure 413. The step of driving the at least one wire 412 further comprises passing the olive structure 413 through the opening 409 of the proximal guide portion 410.

In some embodiments, the drill guide 400 has a removable tip 405 with a slot 406 therein and a front opening 407 for feeding the wire 412 therethrough. The wire 412 has an olive structure 413 larger than the front opening 407. The step of driving the at least one wire 412 includes driving the wire 412 until the olive structure 413 is within or near the tip 405, and removing the tip 405 of the drill guide 400 by passing the slot 407 of the tip over the wire 412.

In some embodiments, a socket 414 (collar) receives the front end of the barrel 401 and the rear end of the tip 405. In some embodiments the socket 414 has slots to provide sufficient compliance that the socket 414 can snugly receive the front end 416 of the barrel and the rear end of the tip 405. In some embodiments, the length of the front end 416 and the length of the socket 414 are selected to allow the socket



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414 to slide part of the length of socket forward to extend the length of the drill guide (in the position shown in FIG. 22). Alternatively, the drill guide can be included in a kit having a plurality of sockets 414 of different lengths.

FIGS. 27 and 28 are isometric and side cross sectional views of another embodiment of the drill guide 400-2, in which the barrel 401 and socket 415 are integrally combined in one unitary piece. The remaining elements of drill guide 400-2 are the same as for the drill guide 400, as indicated by like reference numerals, and descriptions of these elements are not repeated for brevity. The operation and use of the drill guide 400-2 is the same as described above with reference to FIGS. 23-26, and the description is not repeated, for brevity.

FIGS. 29 and 30 are isometric and side cross sectional views of another embodiment of the drill guide 400-3, in which the tip 425 and socket 427 are integrally combined in one unitary piece. The tip 425 includes a central passage 427 having a front opening, and a radial slot 426 connecting the central passage 427 to the outer surface of the tip 425. The socket receptacle 428 receives the front end 416 of the drill guide barrel 401. The remaining elements of drill guide 400-2 are the same as for the drill guide 400, as indicated by like reference numerals, and descriptions of these elements are not repeated for brevity. The operation and use of the drill guide 400-3 is the same as described above with reference to FIGS. 23-26, and the description is not repeated, for brevity.

FIGS. 35-40 show a sponge clip which can be used during any of the fixation procedures described herein (e.g., Charcot fixation procedure). The clip comprises a body 500 having a longitudinal axis 520 (shown in FIG. 40, and coinciding with section line 40-40 in FIG. 39). The body 500 has a tubular sidewall 511 integrally attached at a perimeter of the body. The body 500 has a slot 501 extending parallel to the longitudinal axis 520. The slot 501 penetrates the tubular sidewall 504 and extends part way through the body 500.

The body 500 has first and second longitudinal tubular gripping surfaces 503 and 504 within the slot 501. The second longitudinal tubular gripping surface 504 has an inner diameter that is different from an inner diameter of the first longitudinal tubular gripping surface 503. The slot 501 extends through each of the first and second longitudinal tubular gripping surfaces 503, 504. The gripping surface 503 is sized to grip a wire 412 (e.g., smooth 1.8 mm or 2 mm K-wire or olive wire), and the gripping surface 504 is sized to grip a standard (4 mm, 5 mm or 6 mm) half pin 350 (shown in FIG. 1C) of the type surgically inserted during the procedure. (Pins 350 can be inserted in the anterior side of the tibia or in the calcaneus, but wires 412 are used elsewhere. Wires can also be used in the tibia and/or calcaneus.) By inserting the wire 412 or pin 350 into the slot 501 and placing the gripping surface 503 around the wire 412 (or the gripping surface 504 around the pin), the clip is quickly attached to the pin 350 or wire 412 without any tools. The clip can be positioned close to the insertion site of the wire or pin, to retain a sponge or other absorbent material against the wound site.

The body has first and second end surfaces 510, 511. The first end surface 510 is perpendicular to the longitudinal axis 520, and the second end surface 511 is oriented at an oblique angle relative to the longitudinal axis 520. The clip 500 can be attached to a wire 412 or pin 350 perpendicular to the bone, with the first end surface 510 facing toward the wound site, and the second end surface 511 facing away from the wound site. In this orientation, the first end surface 510 is

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parallel to the surface of the bone and holding a sponge against the wound site. Alternatively, the clip 500 can be attached to a wire 412 or pin 350 at an oblique angle with respect to the bone, with the second end surface 511 facing toward the wound site, and the first end surface 510 facing away from the wound site. In this orientation, the second end surface 511 is parallel to the surface of the bone and holding a sponge against the wound site. Thus, by selecting which end of the clip 500 to place closer to the wound site, the surgeon can maximize the area of the clip which engages the sponge (or other dressing) with the longitudinal slot 501 of the clip 500 aligned with the wire 412 or pin.

In some embodiments, the clip 500 has a counterbore 505 in the first end surface 510, to relieve pressure on the wound site. In some embodiments, the clip 500 has a counterbore 518 in the second end surface 511. The counterbores 505, 518 can assist in retaining the sponge or other dressing. In some embodiments, one or both of the counterbores 505, 518 has reinforcing ribs 517.

In some embodiments, the first longitudinal tubular gripping surface 503 is at or near the longitudinal axis 520, and the second longitudinal tubular gripping surface 504 is near a periphery of the body. In some embodiments, the second longitudinal tubular gripping surface 504 has a dimension G2 perpendicular to the longitudinal axis 520 which is larger than a dimension G1 of the first longitudinal tubular gripping surface 503 perpendicular to the longitudinal axis 520.

In some embodiments, the clip has a flat surface 513 opposite the opening of the longitudinal slot 501, to permit the surgeon or technician to push the clip onto the wire 412 or pin. The flat surface can have a key 515 to provide flexibility to open and close the clip, and to retain the clip on the pin. The remainder of the body has a round perimeter for ease of removal.

In some embodiments, the clip is formed from a single piece of a plastic, such as acrylonitrile-butadiene-styrene (ABS).

In some embodiments, a method for using the above-described apparatus for positioning a leg of a patient comprises pre-loading respective fixation devices 330, 302 in a plurality of slots (e.g., 110) of a circular fixator 100. Each fixation device 330 has a threaded bolt with a side slot 307 in a side edge thereof. The circular fixator 100 includes at least one ring e.g., 102, having the plurality of slots (e.g., 110) extending therethrough. The ring 102 has a scallop shaped recess 112a, 112b or recess pocket with a plurality of curved arcs on each of two respective interior edges that define the slot 110 therebetween. The fixation device 330 further includes a washer 340 having peripheral edges 343 adapted to fit in a respective curved arcs of the respective recess 112a, 112b of each of the edges. Alternatively, if the user wants to put the fixation device 330 in between scallops, the user can turn the washer 340 sideways, to clear the scallops.

Each threaded bolt 330 has a respective head 332 and a respective nut 334, and at least one slot (e.g., 110) of the circular fixator 100 has an opening 114a, 114b at each end thereof. The openings 114a, 114b have a size larger than a size of the head 332. The pre-loading step includes: inserting the head 332 or nut 334 of one of the fixation devices 330 through one of the openings 114a, 114b, so that the ring 102 is between the head and the nut; and inserting a plug 170 in each of the openings 114a, 114b after inserting the head 332 or nut 334, to prevent the fixation device 330 from falling out of the ring 102.

In some embodiments, at least one leg positioner 200 is attached a posterior end of the circular fixator without using



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a tool before the position step. In some embodiments, the leg positioner **200** includes a plurality of adjustable supports **204**, **206**, the method further comprises independently adjusting the position of each support **204**, **206** without using a tool, to accommodate the leg thereon.

Some embodiments include attaching leg positioners **230**, **250** to the circular fixator **100** on medial and lateral sides of a foot of the patient without using tools, so as to support the foot in a neutral or other desired position, before inserting the at least one wire **412**. In some embodiments, each of the additional leg positioners **230**, **250** includes a mounting device **257** having a threaded member **256**. The step of attaching additional leg positioners comprises: placing the mounting device **257** so that the threaded member **256** of the mounting device extends through the slot (e.g., **138**) of the ring **130** and a slot **235** (**255**) in an arm **231** (**251**) of the leg positioner **230** (**250**), and the head **254** of the mounting device **257** engages respective recesses (e.g., **140a**, **140b**) in the ring **130** on opposite sides of the slot **138** of the ring **130**; and securing the mounting device **257** and the leg positioner **230**, **250** to the ring **130** with a nut **252**.

The circular fixator **100** is positioned around the leg. In some embodiments, the circular fixator **100** has first and second circular rings **142**, **130** adapted to be positioned around the leg of the patient. The first ring **142** is greater in diameter than the second ring **130**, and the positioning step includes: positioning the first ring **130** around a first portion of the leg, and positioning the second ring **142** around a second portion of the leg. The first portion of the leg has an anterior-to-posterior dimension that is greater than an anterior-to-posterior dimension of the second portion of the leg.

At least one wire **412** is inserted through leg after the pre-loading. The surgeon positions the wire drill guide **400** with the finger **404** engaging the ring (e.g., **102**) of the circular fixator **100** near the insertion site, and directs the tip **405** inward toward the bone. The tip **405** can be extended to contact the bone. The surgeon inserts the wire **412**. When the olive structure **413** reaches the passage **411**, the tip **405** is removed, and the drill guide **400** can be backed away from the insertion site.

Each pre-loaded fixation device is slid until the side slot **348** thereof engages the at least one wire **412**. To permit this step, the pre-loading includes placing the threaded bolt **330** of one of the fixation devices through the slot **110** of the circular fixator ring **102** with a nut **334** attached to the bolt, so that the nut is sufficiently loose to permit the sliding. The sliding step includes moving the one of the fixation devices **330** until the peripheral edges **343** of the corresponding washer **340** of the fixation device are received in respective curved arcs of the respective recess **112a**, **112b** of each of the edges.

In some embodiments, at least one of the fixation devices **330** includes a post **302** having a longitudinal slot **307** therethrough and a threaded member **314**, and the pre-loading includes: placing the threaded bolt **330** of one of the fixation devices through a slot **307** in the post **302** of that fixation device, placing respective nuts **316** on the threaded member **314** of the post **302** and the threaded bolt **330**, and placing the fixation device **330** in the ring **102**, so that the threaded member **314** of the post extends through the slot **110** of the ring **102**, with the nut **316** on the threaded member **314** of the post **302** sufficiently loose to permit the sliding. The ring **102** has a scallop shaped recess **112a**, **112b** with a plurality of curved arcs on each of two respective interior edges that define the slot of the ring therebetween, the post **302** has a mounting surface **303** configured to fit in a respective one of the curved arcs of the scallop-shaped

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recess **112a**, **112b** on each respective side of the slot **110** in the ring **102**, and the step of sliding includes sliding the threaded member **314** of the post **302** within the slot **110** until the side slot **348** of the threaded bolt **330** engages the wire **412** and the mounting surface **303** of the post **302** is received by a pair of the curved arcs of the scallop shaped recess **112a**, **112b**.

In some embodiments, the post **302** has a plurality of grooves **306** on a side face thereof, and the fixation device further comprises a washer **340** having a ridge **342**; the method further comprises: inserting the threaded bolt **330** through the washer **340**, wherein the step of placing the threaded bolt **330** through the slot **307** in the post **302** includes engaging one of the grooves **306** with the ridge **342**.

The fixation devices **330**, **350** are secured by tightening, so as to secure the engaged wire **412** to the circular fixator. In some embodiments, the securing includes tightening a head **332** or a nut **334** of at least one of the fixation devices **330** using a ratcheting wrench **600** having a socket member **602** with an open end **603** in the socket member to fix the fixation device **330**; and passing the wire **412** or pin **350** through the open end **603** of the socket **602** after the tightening to remove the wrench.

Once the wires **412** and/or pins **350** are inserted, the leg positioners **200**, **230**, **250** are removed. The side leg positioners **230**, **250** are removed by loosening the corresponding nuts **252** from the mounting devices **257**, and releasing the positioners **230**, **250**. The removal of the leg positioner assembly **200** includes retracting each support device **204**, **206** until the corresponding neck portion **207n** of the corresponding arm **207** is aligned in between the retaining members **221**; and sliding the support members **204**, **206** out through the passage **205** between the retaining members in a direction perpendicular to the direction of the retraction (and parallel to the front face **201a** of the body **201** of the leg positioner assembly **200**. Once the support members **204**, **206** are removed, the body **201** of the leg positioner assembly **200** can be removed by unscrewing the knob **218**.

In some embodiments, following insertion of at least one wire **412** or pin **350**, a first sponge or other dressing (not shown) is held at a first wound site of the patient using a first clip **500** having a longitudinal slot **501** in a side surface of the first clip **500** for receiving and gripping the wire **412** or pin **350** to position the sponge.

The first clip **500** has a flat surface **510** at a first end thereof for engaging the sponge with a longitudinal axis **520** of the first clip **500** approximately normal to a tissue of the patient at the first wound site. The first clip **500** has an angled surface **511** at a second end opposite the first end, and the method further comprises: holding a second sponge (not shown) at a second wound site of the patient using a second clip **500** for receiving and gripping a second wire **412** to position the second sponge. The second clip **500** is identical to the first clip. The angled surface **511** of the second clip engages the second sponge with a longitudinal axis **520** of the second clip at oblique angle relative to a tissue of the patient at the second wound site.

In some embodiments, the first clip has first and second tubular gripping surfaces **503**, **504** within the longitudinal slot. The at least one wire **412** is gripped by the first tubular gripping surface **503**. The second tubular gripping surface **504** has a different size from the first tubular gripping surface **503**. The second wound site has a half pin **350** or a second wire **412** inserted therein, the half pin **350** or second wire **412** has a different diameter from the at least one wire, and the half pin **350** or second wire is gripped by the second tubular gripping surface **504** of the second clip.



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Although the subject matter has been described in terms of exemplary embodiments, it is not limited thereto. Rather, the appended claims should be construed broadly, to include other variants and embodiments, which may be made by those skilled in the art.

What is claimed is:

1. A wire drill guide, comprising:
  - a barrel extending from a proximal end to a distal end, the proximal end of the barrel comprising a proximal guide portion and defining an inlet opening having a first diameter, the distal end of the barrel defining an outlet passage having a second diameter and including a rearward extending finger sized and configured to wrap around an inner edge of a ring of a circular fixator;
  - a tip defining a central longitudinal passage having a third diameter and a slot, the slot extending in a radial direction from the central longitudinal passage to an exterior surface of the tip; and
  - a socket for coupling together the barrel and the tip.
2. The wire drill guide of claim 1, wherein the first diameter is greater than the second diameter, and wherein the second diameter is greater than the third diameter.
3. The wire drill guide of claim 1, wherein the barrel and the socket are integrally combined in one unitary piece.
4. The wire drill guide of claim 1, wherein the tip and the socket are integrally combined in one unitary piece.
5. A wire drill guide, comprising:
  - a barrel extending from a proximal end to a distal end, the proximal end of the barrel comprising a proximal guide portion and defining an inlet opening having a first diameter, the distal end of the barrel defining an outlet passage having a second diameter;
  - a tip defining a central longitudinal passage having a third diameter and a slot, the slot extending in a radial direction from the central longitudinal passage to an exterior surface of the tip; and
  - a socket for coupling together the barrel and the tip, wherein the socket defines a first slot on a proximal end of the socket and a second slot on a distal end of the socket, the first slot sized and configured to receive the distal end of the barrel and the second slot sized and configured to receive a rear end of the tip.
6. A wire drill guide, comprising:
  - a barrel extending from a proximal end to a distal end, the proximal end of the barrel comprising a proximal guide portion and defining an inlet opening having a first diameter, the distal end of the barrel defining an outlet passage having a second diameter;
  - a tip defining a central longitudinal passage having a third diameter and a slot, the slot extending in a radial direction from the central longitudinal passage to an exterior surface of the tip; and

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- a socket for coupling together the barrel and the tip, wherein a length of the proximal end of the barrel and a length of the socket are selected to allow the socket to slide a part of the length of the socket forward to extend a length of the wire drill guide.
- 7. A kit, comprising:
  - the wire drill guide of claim 1; and
  - a wire sized and configured to be received in the barrel.
- 8. The kit of claim 7, further comprising a plurality of sockets, each socket of the plurality of sockets having a different length.
- 9. The kit of claim 8, wherein a portion of the barrel is shaped as a partial cylinder having a pair of spaced apart flat sides that extend parallel to a longitudinal axis of the barrel.
- 10. The kit of claim 7, wherein the wire is a smooth wire.
- 11. The kit of claim 7, wherein the wire is an olive wire including an olive structure.
- 12. The kit of claim 11, wherein the first diameter of the inlet opening is larger in diameter than the olive structure.
- 13. The kit of claim 11, wherein the second diameter of the outlet passage is larger in diameter than the olive structure.
- 14. The kit of claim 11, wherein the third diameter of the central longitudinal passage is larger in diameter than the olive wire but smaller in diameter than the olive structure.
- 15. A method, comprising:
  - placing the wire drill guide of claim 1 on a ring of a circular fixator;
  - inserting a wire through the inlet opening at the proximal end of the barrel to the distal end of the barrel; and
  - driving the wire into the bone.
- 16. The method of claim 15, wherein:
  - the wire has an olive structure larger than the inlet opening;
  - driving the wire includes driving the wire until the olive structure is located in a position that is at least one of adjacent to or within the tip; and
  - the method includes removing the tip of the wire drill guide by passing the slot of the tip over the wire.
- 17. The method of claim 15, wherein the wire drill guide has a flat surface and a finger that extends from the distal end of the barrel to the proximal end of the barrel, and wherein placing the wire drill guide on the ring of the circular fixator includes positioning the wire drill guide so that the finger wraps around the ring such that the flat surface engages the ring.
- 18. The method of claim 17, wherein the flat surface engages a top surface of the ring.
- 19. The method of claim 17, wherein the flat surface engages a bottom face of the ring.

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